

AUG 6 1982

MARCH - APRIL 1982

TWENTY-SECOND YEAR — No. 227

international review of the red cross



INTER ARMA CARITAS

PROPERTY OF U. S. ARMY
THE JUDGE ADVOCATE GENERAL'S SCHOOL
LIBRARY

GENEVA
INTERNATIONAL COMMITTEE OF THE RED CROSS
FOUNDED IN 1863

INTERNATIONAL COMMITTEE OF THE RED CROSS

- Mr. ALEXANDRE HAY, Lawyer, former Director-General of the Swiss National Bank, *President* (member since 1975)
- Mr. HARALD HUBER, Doctor of Laws, Federal Court Judge, *Vice-President* (1969)
- Mr. RICHARD PESTALOZZI, Doctor of Laws, *Vice-President* (1977)
- Mr. JEAN PICTET, Doctor of Laws, former Vice-President of the ICRC (1967)
- Mrs. DENISE BINDSCHEDLER-ROBERT, Doctor of Laws, Professor at the Graduate Institute of International Studies, Geneva, Judge at the European Court of Human Rights (1967)
- Mr. MARCEL A. NAVILLE, Master of Arts, ICRC President from 1969 to 1973 (1967)
- Mr. JACQUES F. DE ROUGEMONT, Doctor of Medicine (1967)
- Mr. VICTOR H. UMBRIGHT, Doctor of Laws, Managing Director (1970)
- Mr. GILBERT ETIENNE, Professor at the Graduate Institute of International Studies and at the Institut d'études du développement, Geneva (1973)
- Mr. ULRICH MIDDENDORP, Doctor of Medicine, head of surgical department of the Cantonal Hospital, Winterthur (1973)
- Mrs. MARION BOVÉE-ROTHENBACH, Doctor of Sociology (1973)
- Mr. HANS PETER TSCHUDI, Doctor of Laws, former Swiss Federal Councillor (1973)
- Mr. HENRY HUGUENIN, Banker (1974)
- Mr. JAKOB BURCKHARDT, Doctor of Laws, Minister Plenipotentiary (1975)
- Mr. THOMAS FLEINER, Master of Laws, Professor at the University of Fribourg (1975)
- Mr. ATHOS GALLINO, Doctor of Medicine, Mayor of Bellinzona (1977)
- Mr. ROBERT KOHLER, Master of Economics (1977)
- Mr. MAURICE AUBERT, Doctor of Laws, Banker (1979)
- Mr. RUDOLF JÄCKLI, Doctor of Sciences, (1979)
- Miss ANDRÉE WEITZEL, former head of the women's auxiliary service at the Federal Military Department, vice-president of the Swiss national Commission for Unesco (1979)
- Mr. OLIVIER LONG, Doctor of Laws and Doctor of Political Science, Ambassador, former Director General of GATT (1980)
- Mr. DIETRICH SCHINDLER, Doctor of Laws, Professor at the University of Zürich (1961-1973; 1980)

EXECUTIVE COUNCIL

- Mr. ALEXANDRE HAY, *President*
Mr. RICHARD PESTALOZZI
Mr. JAKOB BURCKHARDT
Mr. ATHOS GALLINO
Mr. RUDOLF JÄCKLI
Miss ANDRÉE WEITZEL

The International Committee of the Red Cross (ICRC), together with the League of the Red Cross Societies and the 128 recognized National Red Cross and Red Crescent Societies, is one of the three components of the International Red Cross.

An independent humanitarian institution, the ICRC is the founding body of the Red Cross. As a neutral intermediary in case of armed conflicts or disturbances, it endeavours on its own initiative or on the basis of the Geneva Conventions to protect and assist the victims of international and civil wars and of internal troubles and tensions, thereby contributing to peace in the world.

CONTENTS

INTERNATIONAL COMMITTEE OF THE RED CROSS

IN THE RED CROSS WORLD

MISCELLANEOUS

BOOKS AND REVIEWS

INTERNATIONAL REVIEW OF THE RED CROSS

ISSN 0020-8604

March - April 1982 — No. 227

H. G. Beckh : The reuniting of families in Europe
during and after the Second World (III) . . . 71

Richard Perruchoud : Résolutions of International
Red Cross Conferences and their implementation
by the National Societies 86

Recognition of the Tonga Red Cross Society . . 95

Recognition of the Qatar Red Crescent Society . 97

Death of Sir Geoffrey Newman-Morris. 99

Death of Charles-André Schusselé 100

Republic of Mauritius accedes to Protocols . . . 101

External activities:

Africa — Latin America — Asia — Middle East
— Europe 102

Seventh award of the Henry Dunant Medal . . 117

Pictures in the service of the Red Cross 120

Smallpox eradication 127

Bibliography of international humanitarian law . 128

International Review of the Red Cross is published by the International Committee of the Red Cross. It first appeared in French in 1869.

As the official organ of the ICRC, specializing in international humanitarian law and recording the international activities of the Red Cross, *International Review of the Red Cross* provides a constant flow of information and constitutes the necessary link between the members of the International Red Cross.

International Review of the Red Cross appears once every two months in three languages:

in English: INTERNATIONAL REVIEW OF THE RED CROSS (from 1961)

in French: REVUE INTERNATIONALE DE LA CROIX-ROUGE

in Spanish: REVISTA INTERNACIONAL DE LA CRUZ ROJA (from 1976)

It also publishes, in German, a short edition, *Extracts*, of various articles which appear in the main editions.

EDITOR: Michel Testuz

ADDRESS: International Review of the Red Cross
17, Avenue de la Paix
CH - 1211 Geneva, Switzerland

SUBSCRIPTIONS: one year, Sw. frs. 30.—; single copy Sw. frs. 5.—
Extracts in German: one year, Sw. frs. 10.—; single copy
Sw. frs. 2.—

Postal Cheque Account: No. 12 - 1767 Geneva

Bank account No. 129.986 Swiss Bank Corporation, Geneva

*The International Committee of the Red Cross assumes responsibility
only for material over its own signature.*

THE REUNITING OF FAMILIES IN EUROPE DURING AND AFTER THE SECOND WORLD WAR

Part Three

by H. G. Beckh

This article by H. G. Beckh is the third¹ in the series entitled "The Reuniting of Families in Europe during and after the Second World War". The author gave it to us, not fully completed, on 23 April 1981; he died a few days later.

Mr. Beckh was a delegate of the ICRC for many years. In this capacity, he played an active and important role in the negotiations for reuniting families in Europe over a period of about 30 years. On his role he remained always very discreet. He was none the less the only person who knew some of the facts he reports. This is why the International Review has decided to publish this last article by Mr. Beckh, even though some points may be lacking in precision.

POLAND

During "Operation Link", which was actively led by the ICRC as part of the overall family reunification operation, some 47,000 Germans and "ethnic Germans" (Volksdeutsche) were transferred from Poland to the Federal Republic of Germany by the end of 1949.² This operation was focused on family separations that were a direct result of the war. ICRC delegate François Ehrenhold was able to handle these cases

¹ See the first two articles in the *International Review of the Red Cross*, July-August 1979 and May-June 1980.

² The parallel operation for transfer from Poland to the German Democratic Republic could only be estimated at between 36,000 and 40,000 persons.

personally until the ICRC delegation in Warsaw was closed in November 1949 in compliance with the wishes of the Polish authorities. The Polish Red Cross declared that it would take over the important task that the ICRC delegation in Poland had been performing.

It should be noted that generally speaking the ICRC maintained only a few permanent delegations in foreign countries after the Second World War; instead it used to send from Geneva temporary missions according to the specific tasks to be performed in the various countries. The ICRC sent delegate Ehrenhold on a new mission to Warsaw in July 1951 to ask the Polish authorities to speed up the process of further reunification, since a too lengthy separation of its members could cause a family's complete disintegration.

A change occurred in the ICRC's participation in the family reunification operation after the closing of its Warsaw delegation. Shortly following the beginning of the major international task of family reunification, the National Red Cross Societies, in conjunction with the other welfare associations, were able to secure the help of governments and to mobilize all humanitarian resources in the receiving countries so that the question arose whether it would be possible for ICRC to reduce its collaboration to the role of an adviser and to handle only cases where the efforts of the National Red Cross Societies had failed.

The ICRC adopted a pragmatic position and decided to continue its practical collaboration towards solving these international humanitarian problems where it appeared possible and useful to do so. Consequently, the nature of its activities in this area varied according to circumstances. It actively supported efforts to adopt resolutions on this question at the International Red Cross Conferences and to apply them, but in many areas it left the practical work to the National Red Cross Societies. This was largely what happened in the reuniting of families from Poland. For this reason direct working relations were established and then intensified in the best Red Cross spirit between the Polish Red Cross and the German Red Cross in Bonn.

Among several questions of principle concerning the intrinsic value and the possibility of carrying out this operation, there was the following: Was it opportune to carry out, on an international level, these family reunifications, at a time the general situation was still tense and when so many urgent tasks provided for by the Geneva Conventions, such as caring for prisoners of war and repatriating them, were still awaiting to be performed? Wasn't it necessary to await a general relaxation of tension and greater humanitarian understanding before this task could be performed? The previously mentioned Hanover Conference

had already provided the foundation for this sort of planning. Looking back at it, we can say that an almost complete reversal of concepts took place at that Conference. It was agreed that rather than the preconditions for family reunification being established by efforts to achieve a peaceful reconciliation between peoples and philosophies, this humanitarian operation, that is this family reunification, would be instrumental in creating new, mutual understanding.

The second phase of the reunion of families coming from Poland, in which took place the transfer of practical work to the Red Cross Societies, was followed by a third phase. The criterion on family reunification was founded on the principle that families of German origin, after the new frontier was fixed, should be able to resettle in the Federal Republic of Germany if they expressed the wish to do so. There was no longer any ICRC collaboration in this third phase. Intergovernmental agreements directed the undertaking during this last period. The German Red Cross in Bonn and the welfare associations concerned were particularly active in the acceptance and integration of these immigrants into the Federal Republic of Germany.

Co-operation with the Red Cross Societies and governments involved yielded precise information that the ICRC's humanitarian activities during the first phase of the reunification (Operation Link) enabled 47,000 people from Poland to be reunited with their families. We can only estimate what the number was for the second phase. The ICRC was given only partial information, and it was necessary to complete the figures from Red Cross documents and reliable press releases. The results including Operation Link indicate that 387,000 Germans and "ethnic Germans" from Poland had been reunited with their families by 1967. The number of people reunited during the third phase can only be estimated. It is reckoned that they probably numbered between 80,000 and 100,000.¹

YUGOSLAVIA

Family reunification was different in Yugoslavia. The ICRC not only laid the foundations for the operation and emphasized its urgency but was also instrumental in carrying it out.

¹ The estimated number of family reunifications that took place between Poland and the German Democratic Republic, mentioned on page 71, is not included.

Unaccompanied children of German ethnicity

These were children of German minorities who had been separated from their families by the war and its aftermath. Many children had lost all ties with their families, and the very young were often unable to give clear information about their parents or relatives. Many had even forgotten their names.

Much of the work of searching for children, parents and other relatives was done by the Tracing Service of the German Red Cross in Bonn in co-operation with the Yugoslav Red Cross. Hundreds of bills concerning the children were posted in public. Within a few years, many cases had been sufficiently clarified to enable reunification to be planned and executed. By the time of the 1951 Refugee Conference in Hanover, negotiations were opened with Yugoslav government authorities concerning some seven partial operations of feasible reunification. A turning-point came later when the Yugoslav Red Cross declared its competence in the matter and, on the strength of its experience in humanitarian work, took over a greater number of cases.

What then occurred was in the best spirit of the Red Cross and set a precedent for the future. The two ICRC delegates referred to earlier received all possible support from this National Red Cross Society.¹

The organization of the search for ethnic German children and their subsequent transport to Germany and Austria was remarkable in the kindness with which the children of former enemies were treated. The first children were transported in November and December 1950, with 87 going to Austria and 67 to Germany. The transfer formalities were carefully completed by representatives of both the Austrian Red Cross and the German Red Cross in Bonn and in the presence of the head of the ICRC delegation in Vienna, G. Joubert. This procedure included a medical examination. All records were signed by the ICRC delegate.

With the support of the respective Tracing Services, the ICRC delegates were also instrumental in providing information and handling the various child cases in Yugoslavia. This made it possible for further transportation to take place. By 31 May 1955, 1,541 children had been reunited with their parents or closest relatives in the Federal Republic of Germany, 647 in Austria, 29 in the German Democratic Republic,

¹ Their numerous missions to Belgrade were supported especially by Dr. Milosevic, Prof. J. Patrlogic and other colleagues of the General Secretariat.

11 in France, 8 in Great Britain, 6 in Canada, 2 in Belgium, 1 in Argentina, 1 in Venezuela, 1 in Australia and 12 in the United States of America.

By the time the operation in aid of unaccompanied children was virtually completed, it had had the greatest numerical success of all operations, i.e. 98% of the known cases involving children had been solved.

Adults and adults accompanied by their children

The successful children's operation made it easier for the two ICRC delegates responsible for the extension of family reunification programmes to negotiate on the subject in Belgrade.

The negotiations with the Yugoslav Secretary of State for Foreign Affairs and the diplomatic mission of the Federal Republic of Germany in Belgrade were decisive. The Yugoslav Government agreed to the principle of family reunification but emphasized the importance of laying down conditions for its actual application. It accorded a special status to persons classified as « ethnic Germans » despite their Yugoslav nationality, but since according to the Yugoslav Nationality Act, Yugoslavs leaving the country with the express intention of never returning lose their citizenship, the Yugoslav Government considered it important to avoid contributing to an increase in the number of stateless persons. It was thus felt that ethnic Germans who left Yugoslavia during the operation should receive immediate citizenship in the country of arrival, which was most often Germany. This was the condition imposed by the Yugoslav Government for its agreement to an extension of the family reunification operation. An agreement was drafted to this effect that had also to be signed by the representative of the German diplomatic mission. It stated that departing ethnic Germans had to take with them a certificate from the German consulate in Yugoslavia guaranteeing that they were recognized as being of German origin and would be given German citizenship immediately upon their arrival in the Federal Republic of Germany.

Once they had obtained this certificate of German Assimilation, they had to apply for release from their Yugoslav nationality. When this had been granted — and there were very few exceptions — they received the necessary travel documents for their departure.

This procedure proved so practical that it was used either directly or indirectly for departures to other countries. It was also helpful that

under the circumstances the people concerned were considered as Germans and could apply for admission into other countries as such.

The initial statistics on this operation, which is now virtually completed and was usually carried out on the basis of individual departures, were recorded by State offices. More recent estimates indicate that the number of departures linked for the most part to family reunification to be between 80,000 and 90,000.

CZECHOSLOVAKIA

As in the case of Poland, the family reunification procedure for Czechoslovakia can be divided into three phases. During the first phase, the ICRC participated both on a theoretical level by arguing in favour of family reunification and on a practical level by attending the negotiations for the issuing of exit visas and by helping to organise transport.

During the second phase, the ICRC continued to be active on a practical level, although to a lesser degree; in the third phase this work was largely taken over by the two National Red Cross Societies, although the ICRC did continue to collaborate during the 1960s by helping to clarify individual cases and by sending missions to Prague.

The ICRC's practical co-operation was particularly important during the first phase since its delegate, G. Dunand, cared for civilians of German origin¹ held in detention camps, in addition to his activities in aid of prisoners of war. He made 333 visits to camps from 1945 to 1949. In addition to his efforts to improve camp conditions, he was active in reuniting families that had been separated as a result of the war and its aftermath.

Owing to the expulsions that took place following the Potsdam Agreements, most family reunions after that were possible only if the members remaining in Czechoslovakia were also granted permission to leave the country. ICRC delegates Meyer-Moro and Reichard later dealt with all the details of this problem. They also managed to organize and accompany the first actual family reunification transport operation approved by Czechoslovak authorities, which proceeded to Bavaria via the camp at Furth im Wald.

¹ After the outbreak of the war in 1939, which made it impossible to present the 1934 Tokyo draft for revising the Geneva Convention of 1929 to a diplomatic conference, the ICRC endeavoured to improve the status of civilians in times of war by extending the provisions of the Convention of 1929 on the treatment of prisoners of war to civilian internees.

The ICRC delegates secured in advance from the competent German and American officials the necessary agreement for the acceptance of these Germans in the American-occupied zone. The Bavarian Red Cross co-operated extensively in these negotiations.

Further transport operations followed, reuniting 16,740 Germans from Czechoslovakia with their families during the period from March 1950 to December 1951.

The ICRC delegation in Prague was then closed, which reduced the active participation of the ICRC and led to extensive co-operation between the German Red Cross in Bonn and the Czechoslovak Red Cross. The ICRC did, however, continue to provide theoretical support and to solve numerous individual cases through ICRC delegate H. G. Beckh, who went on missions to Czechoslovakia until August 1969.

One unusual reunification was the return of 365 nuns of the Holy Cross to their convent in Ingenbohl (Switzerland). Thanks to extensive negotiations between the ICRC and the Czechoslovak Red Cross and support from the latter, these nuns returned to Switzerland on several well-organized flights arranged by the Swiss Red Cross.

Further transport operations for family reunification took place to the Federal Republic of Germany and Austria until 1967. From that time on, the author has had to rely mainly on the estimates that by the beginning of the 1970s some 30,000 to 40,000 more people had been able to leave Czechoslovakia to be reunited with their families through both reunification operations and individual departures.

ROMANIA

In Romania too the immediate and longer-term consequences of the Second World War caused numerous family reunification problems which the ICRC undertook to solve in close collaboration with the Red Cross Societies concerned.

The hostilities had caused many members of the German-speaking minority to leave the country, although no expulsions took place here as they had after the Potsdam Agreements. Their return to Romania was made difficult and they had also been able to build themselves something of a new life outside Romania, so their close relatives wanted to join them. In addition, the competent authorities in the USSR repatriated the German and Austrian prisoners of war to their former homelands, which their families had left. The opposite occurred as well. Families were also separated when ethnic Germans left Romania

to work in the Soviet Union and were later sent to Germany or Austria while their families remained in Romania. The ICRC's efforts to solve this problem, including direct appeals to the Romanian Ministry of Foreign Affairs, were unsuccessful until 1948.

However, after ICRC delegate Meyer-Moro's first mission to Bucharest in May 1948, the Romanian Red Cross agreed to deal with individual cases referred to it by the ICRC. The negotiations then intensified and by the end of 1949, 100 to 200 cases had been solved by the issue of entrance permits into Germany and the payment (partly in foreign currency) of travel expenses.

The efforts for further operations were pursued and continued to be actively supported by the German Red Cross in Bonn and its Tracing Service in Hamburg. The diplomatic mission of the German Democratic Republic also worked towards reuniting families and enjoyed partial success. Some of these reunifications took place in the German Democratic Republic; other people were sent on to the Federal Republic of Germany.

Efforts were also made to bring about reunification of families divided between Romania and Austria, in particular by the Austrian Red Cross and its Tracing Service.

During the International Red Cross Conference in Oslo in 1954, delegate François Ehrenhold established direct contact with the Romanian Red Cross and emphasized the importance of increasing family reunification. Subsequently, representatives of the Romanian Red Cross visited the ICRC many times, and by 1956 these contacts had developed into regular missions by H. G. Beckh to Bucharest. One of these missions coincided with a visit to Bucharest by the president of the German Red Cross in Bonn, Dr. Weitz, and accompanied by the director of the German Red Cross Tracing Service, Dr. Wagner, who was particularly instrumental in achieving family reunification. This led to some co-ordination between the theoretical and practical work of the two Red Cross organizations, the ICRC and the German Red Cross. On a theoretical level, the ICRC and the German Red Cross representatives both pleaded in favour of family reunification and of its essential value. On a practical level, the Romanian Red Cross received its first extensive lists from the German Red Cross, while the ICRC delegate mostly presented cases that had been referred to him in Geneva. During his subsequent missions he brought along other individual cases — up to one thousand — and discussed them together with the expert of the Romanian Red Cross in charge of repatriation. This Society then chose the most urgent amongst them and usually referred them to the militia

immediately. This method proved increasingly successful and usually the cases were solved during the delegate's stay.

From 1955 to 1967, 15,271 people were recorded entering the Federal Republic of Germany from Romania. To this figure must be added the arrivals in the German Democratic Republic.¹

Although the competence of the ICRC in the matter of family reunification for Romanian nationals of ethnic German origin was recognized by the Romanian authorities, difficulties arose concerning family reunifications for people of pure Romanian origin. This was explained to the ICRC delegate in the presence of the Secretary General of the Romanian Red Cross, who was then successful in supporting the ICRC's request to handle the applicants that had found their way to Geneva. Through this additional activity the ICRC succeeded in reuniting many Romanian families.

At the beginning of the 1970s, in close collaboration with the German Red Cross in Bonn, the ICRC helped bring about the conclusion of many agreements at government level concerning the departure of ethnic German families from Romania, as was already the case for other countries. These agreements were increasingly concerned with more than just family reunification and were intended for families of German origin who had expressed on their own initiative a desire to live in the Federal Republic of Germany.

USSR

The successful negotiations that led to the inclusion of this vast country in family reunification after the Second World War were brought about almost exclusively through the relations maintained by the German Red Cross in Bonn and its Tracing Service with the Alliance of Red Cross and Red Crescent Societies of the USSR.

The separation of families between Germany and the Soviet Union were mostly caused by the demarcation line agreed upon in November 1939 by the two powers occupying Poland. According to the relevant documents², more than 138,000 members of the East German minority were moved to the West. Subsequent requests of these people for family reunification were supported by resolutions adopted at International Red Cross Conferences.³

¹ Large numbers of people emigrated from Romania to Austria and other countries, but the author does not have exact figures.

² E. M. Kulischer, *The Displacement of Population in Europe*, Montreal, 1943.

³ Toronto, 1952; New Delhi, 1957; Vienna, 1965.

The German Red Cross in Bonn reported that the competent authorities usually had an open, understanding attitude towards applicants. This enabled 25,865 Germans to leave the Soviet Union for the Federal Republic of Germany between 1955 and 1967.

Subsequent arrivals of Germans from the USSR in the Federal Republic of Germany took place mostly through the so-called late immigration operation ("Spätaussiedler").

GREEK CHILDREN

The separation of Greek families at the end of the Second World War was a consequence of the events in northern Epirus. Towards the termination of military operations there, thousands of children whose families lived in Greece were taken to neighbouring States and eastern countries.

On 27 November 1948, the General Assembly of the United Nations adopted a resolution with a view to facilitate the return of these children to their parents in Greece or to their closest relatives when the parents were no longer living. All members of the United Nations were requested to provide their aid, and the Secretary General of the United Nations was given the authority to request the ICRC and the League of Red Cross Societies to handle the practical aspects of this problem in conjunction with the local Red Cross Societies.

In addition to its other work, the Central Tracing Agency of the ICRC had before anything else to compile 5 lists of a total of 11,940 registered Greek children and then to divide them into partial sublists and files country by country. They were made available to the delegates of the ICRC, the League and the co-operating mission of the Swedish Red Cross in Yugoslavia.

The following figures were obtained by means of this registration and subsequent investigation carried out by delegates of the League and ICRC in Bulgaria, Yugoslavia, with the Greek Red Cross and with the competent authorities in the children's places of residence in Czechoslovakia, Romania or Poland: 13,500 children had been transported through Yugoslavia and 3,500 had gone to Czechoslovakia, 3,050 to Hungary, 6,400 to Romania and 500 to Poland.

Following requests by parents and relatives 214 Greek children were brought home in 1951 and 152 in 1952. The second group was identified by the mission of the Swedish Red Cross in Belgrade. The children were returned to their families in the presence of the delegates of the League and the ICRC.

The extent to which political difficulties could impede or even prevent such humanitarian operations became apparent later on. The matter dragged on. With the passage of time, the children became adults imbued with the mentality of the environment in which they had grown up. The resulting tensions caused the Greek Red Cross practically to cease its collaboration and transmit the reunification of the by then grown-up children with their families to State authorities. This demonstrated that family reunification cannot tolerate delays: either the parents had died or the alienation gap between the generations could no longer be bridged.

Before the League and the ICRC could terminate this operation, which no longer seemed feasible, ICRC delegate H. G. Beck appealed to the Greek Minister of Social Affairs to facilitate the formalities of return upon agreement by the few surviving relatives.

Later on, provisions were set down in their final form at State level. They required that application be made by family members in Greece before family reunification could be carried out.

When the Office of the UN High Commissioner for Refugees received requests from people wishing to return to their home, it replied that their return was not impossible but that it must take place according to the conditions set down by the competent authorities.

The Red Cross in this activity met only limited success.

BERLIN

In August 1961, political tensions caused thousands of families to be separated in Berlin within a short period of time. Appeals for help were addressed to the ICRC from all sides in the hope that its humanitarian action could restore the unity of these families.

The ICRC immediately approached the competent authorities and Red Cross Societies in contact with them to try and set up such an operation. The ICRC proposal called for permission to have one of its delegates go and evaluate the needs of these families first-hand and participate in the attempts to draft humanitarian solutions.

Since the German Democratic Republic maintained that these problems had to be solved at State level exclusively, the ICRC had to give up its project to send an official mission and entrust its delegate with an unofficial and almost private mission in Berlin, which was carried out for several years beginning in 1961.

This enabled the delegate¹, supported by Geneva ICRC headquarters, to engage in informal conversations that, depending on the circumstances, had the effect of unofficial, humanitarian mediation and showed that the mere presence of an ICRC representative in an area of political tensions could promote humanitarian solutions.

Although one side continued to claim officially that it had exclusive competence in this matter, it also recognized the neutral position of the ICRC and its right to humanitarian initiative.

This attitude was also expressed by the head of State of the German Democratic Republic, Walter Ulbricht, on the occasion of a visit to him by the president of the ICRC, Leopold Boissier, in March 1963. There were no objections to the presence of the ICRC delegate as long as the sovereignty of the State was respected and no official steps undertaken.

It was nevertheless possible for the Geneva delegate to make a substantial contribution towards easing tension in numerous unofficial discussions. Encouragement to drop political considerations as much as possible from attempts at finding humanitarian solutions in deference to the great human suffering endured by the separated families paved the way to further progress at State level.

The author was informed when discussions on frontier passes finally took place in Schöneberg between a representative from the German Democratic Republic and one from the West Berlin Senate, and he was able to express an advisory opinion on important points of the agreement.

The author was also immediately informed when difficulties arose in renewing the frontier agreement. The German Democratic Republic would only recognize the clause excluding political considerations for a specific period of time, and this almost caused the other side to refuse to extend the agreement. The ICRC delegate once again made a decisive contribution in overcoming the new obstacles to a humanitarian solution, this time in the form of an official step that was accepted by the negotiating party concerned.

The visits by West Berliners to their relatives in other parts of Greater Berlin that were made possible by the frontier pass agreement not only brought happiness to these families but also reduced tensions and promoted peace. This caused the Vatican to follow the operation. When further complications arose, Pope Paul VI called the delegate to a private audience in May 1964 in order to learn the details and then intervene in favour of the unquestionable value of family unity.

Further negotiations at State level led to the opening of an emergency frontier pass office for urgent family problems. This office was to

¹ The author of this article (Editor).

achieve a quick processing of requests not only for routine, general visits but also for emergency visits based on urgent humanitarian grounds.

From that time on, the work of the ICRC in favour of Berlin family visits went beyond the unofficial activities of its delegate and included the official steps taken by the Geneva ICRC headquarters with the negotiators, some of these steps being channelled through the negotiators' permanent missions to the international organizations in Geneva.

The high-level correspondence in which the ICRC engaged as part of these activities included an official letter to the President of the Council of State of the German Democratic Republic on 11 January 1967 requesting that the frontier pass agreement of October 1966 be extended and expanded. In that letter, Mr. Pictet, then Director General of the ICRC, explained the organization's position as follows:

"The International Committee of the Red Cross is not competent to judge the possibilities for reconciling the points of view of the parties since these considerations are largely political in nature, but it continues to be competent as regards the tragic humanitarian effects that result from a lack of understanding. (...) It is the task of the Red Cross to intervene on behalf of the innocent victims of conflicts for which they can in no way be held responsible."

The West German negotiators communicated their position concerning the issuing of frontier passes for visiting relatives at the end of December 1963 as follows:

"With this exemplary initiative, the International Committee of the Red Cross has once again shown itself worthy of its great tradition, as in numerous other cases concerning family reunification and family visits for the people of Berlin."

Later on during this period, negotiations took place both in Geneva and Berlin between the ICRC and representatives of the Federal Republic of Germany and the German Democratic Republic in which the ICRC officially applied pressure in favour of the Berlin family visits. It continued to do so until comprehensive State regulations had been approved for humanitarian problems as well.

During his mission to Berlin, the ICRC delegate also had contact with the Tracing Services of the German Red Cross in both parts of the city and worked together with local authorities for family reunification in Berlin. He was later supported by a colleague from the Central Tracing Agency in Geneva.

The ICRC Berlin activities in collaboration with the competent National Red Cross Societies are an example of how humanitarian activities may be hindered by political considerations. However, the

position adopted by the ICRC in dealing with the humanitarian problems of Berlin is also an example of the contribution it is able to make in such situations in spite of these limitations. Its good offices can be useful, as was the case in Berlin. When it is possible for a delegate to be present as an independent, humanitarian observer, he may, according to circumstances, be able to act as an apolitical, humanitarian adviser or even as a knowledgeable mediator.

CONCLUSIONS

The operations of family reunification in Europe after the Second World War just described affect the humanitarian problems of the present in many ways.

It is not by chance that the unquestionable value of family unity and its restoration at times became the central issue of the negotiations held by the International Institute of Humanitarian Law in San Remo. It is also no accident that representatives of the Red Cross were invited to participate, since they were best able to speak about their experiences in the mostly successful family reunification operations in Europe. This institute was responsible for the initiative to strengthen the provisions of the Fourth Red Cross Convention of 1949 concerned with family reunification. This initiative was unanimously approved by the Diplomatic Conference of 1974-1977 on the Reaffirmation and Development of Humanitarian Law Applicable in Armed Conflicts, in Article 74 of Additional Protocol I. This institute also compiled rules for family reunification and published them in the May-June 1980 issue of *International Review*.

The Office of the UN High Commissioner for Refugees played an important role in these theoretical discussions. This office and the offices which were its predecessors adopted a positive attitude towards the problem of family reunification from the start. Today its programme provides active and effective co-operation to solve the problems resulting from the appalling increase in the number of refugees in the world. This is particularly important since the somehow unsuccessful Diplomatic Conference on Territorial Asylum, in January 1977, achieved broad agreement on only two points: the basic principle of the non-return by force of refugees to their country of origin and the importance of family reunification.

The basic legal provisions guiding the post-war operations in Europe have since undergone some changes.

The Universal Declaration of Human Rights of 10 December 1948 establishes the basic principle that everybody has the right to leave and return to any country and freely to determine their place of residence within the country. This provision was included in Article 12 of the International Covenant on Civil and Political Rights of 1966, which emphasizes that the free choice of domicile concerns the country in which the person is legally residing. The tendencies of States to put pressure on population groups to migrate within the country or to leave the country led to the adoption of Article 17 of the Additional Protocol II of June 1977. Until then, the general ban on State-ordered resettling such as took place in Europe following the Potsdam Agreements of 1945 had not been recognized as a norm.

The apparent contradiction of a situation where States must grant an exit permit for the purpose of family reunification without such permits acquiring the characteristics of expulsion underlines how important it is for purely humanitarian considerations to dictate action taken in this area.

The experiences acquired during the European post-war operations are still meaningful today. It was mainly people from the Red Cross movement who — in addition to organizing and providing legal backing for it — laid the moral foundations for implementing this humanitarian action.

Essentially all the leaders of the Red Cross Societies concerned acted in this way. Particular mention should be made of the Presidents of the German Red Cross in Bonn and the tireless efforts made by their Deputy Secretary General, Dr. K. Wagner. They were an example of the extent to which direct contact amongst the Red Cross Societies can lead the governments of the respective countries to provide support for this apolitical humanitarian action.

The position of the ICRC is perhaps best expressed in a statement by its President, Leopold Boissier. After the death of one of the two delegates who had been instrumental in the successful reunification of 100,000 people, he delegated responsibility to the surviving colleague to pursue the operation, with the words:

“If all the efforts made so far had been successful in reuniting only one child with its parents, they should be pursued without change as long as there is hope that a similar result may be possible in the future.”

H. G. Beckh

*former ICRC delegate
for Europe*

Resolutions of International Red Cross Conferences and their implementation by the National Societies ¹

by Richard Perruchoud

I. A REVIEW OF THE QUESTION

Two ideas generally current in the Red Cross on the question of implementation, by the National Societies, of the resolutions adopted during the International Red Cross Conferences are:

1. the resolutions are not binding;
2. the National Societies apply the resolutions voluntarily and in a satisfactory way.

Our purpose here is to examine the exactitude of these two opinions.

1. The resolutions are not binding

In general, the resolutions adopted by international intergovernmental or non-governmental organizations are not binding; only the contrary intent manifested by the parties can decide otherwise. This basic principle is unanimously accepted.

¹ Address at the *Introductory Course to International Red Cross Activities*, at the Henry Dunant Institute in May 1980. Richard Perruchoud is the author of *Les résolutions des Conférences internationales de la Croix-Rouge*, Henry Dunant Institute, Geneva, 1979, 470 pp. (available in French only). At the request of English-speaking readers and particularly of National Red Cross Societies, Richard Perruchoud has written another book, inspired by the first, entitled *International Responsibilities of National Red Cross and Red Crescent Societies*, Henry Dunant Institute, Geneva, 1982, 94 pp. (in English only).

The resolutions of the International Red Cross Conferences cannot by-pass this rule. However, important exceptions do exist. Here are the main ones:

a) *The resolutions of the 1863 Conference* establish the basis of the Red Cross and their binding nature has never been questioned.

b) *The Red Cross statutes of 1928/1952* are binding since they constitute the social compact which links the members of the Red Cross, defines their rights and duties and determines the powers of the various bodies.

c) *The fundamental principles of the Red Cross of 1965* give the Red Cross its *raison d'être* and its own identity; they define the basic nature of the movement, the aims that it strives to attain and the general rules which, in the course of their action, all members must respect.

While the binding nature of the principles is not questioned, it must be remembered that these principles are the guide-lines one must try and follow and not legal standards requiring direct application. Hence these are programmatic standards and their execution or inexecution can only be verified in a given situation, especially one where the resolutions, which themselves are of an exhortative nature, are applied.

Finally, it must be mentioned that the tenth condition for recognition of the National Societies prescribes that the National Societies adhere to the basic principles.

d) *The conditions for recognition of the National Societies* were the subject of Resolution XI adopted at the Conference in Stockholm (1948). The binding nature of this resolution is obvious; National Societies can become full-fledged members of the Red Cross once they fulfil the ten conditions for recognition.

Problems arise when checking whether these conditions are being respected. This can be a dual check:

- to check any statutory changes
- to check whether the activity of the National Societies is in keeping with the conditions for recognition, and especially whether the basic principles are respected.

The control of statutory changes was brought up in Teheran in 1973 and it was decided that if the statutes of a National Society were no longer in conformity with the conditions for recognition, that Society "would lay itself open to question". Moreover, it was decided that if a National Society wished to change its statutes on points relating to the conditions

for recognition, it had to submit such changes to the ICRC and the League and take their recommendations into account (Resolution VI, Teheran, 1973).

The second check is not provided for anywhere; a National Society can easily include in its statutes an article agreeing to adhere to the conditions for recognition and the fundamental principles, and then drift away from these in its daily work.

e) *The principles and rules governing Red Cross relief action in the event of disasters, 1969/1977.* The binding nature of these provisions is sometimes the object of controversy. Nevertheless, let us recall that decisions were made in 1973 and in 1977 whereby these principles were modified. After all, their binding nature is based mainly on their contents and aim. A code of conduct had to be laid down for the members of the Red Cross, i.e. basic rules to be observed in order to ensure the effective working of international relief action. These rules lay down the minimum expected of the Societies.

f) Without pretending to be exhaustive, it must finally be mentioned that *certain resolutions relating to relief work in the event of armed conflicts* are binding. We are referring particularly to those relating to the distribution of relief supplies: these resolutions determine the respective competence of the ICRC and the National Societies in these matters (see especially resolution XIV of 1921).

These few examples suffice to show that resolutions of prime importance do exist and bind the National Societies. This fact must be kept in mind when making a general statement that the resolutions of Red Cross Conferences are not binding on the National Societies.

2. The implementation of the resolutions by the National Societies

It is often claimed that the resolutions are applied by the National Societies. This statement is difficult to verify since the National Societies do not usually present a report to the Conferences on the implementation of the resolutions, as do the ICRC and the League. Nevertheless, a close study of the ICRC and League reports shows that the situation is hardly satisfactory. Here are a few examples of well-known cases of inexecution of the resolutions by the National Societies.

a) The financing of the ICRC

In 1969, 32 National Societies had not made a single payment, even a symbolic one, to the ICRC. In 1973, it was even said that the ICRC

would be ill-advised to suggest compulsory contributions whereas there is no obligation even to make voluntary contributions! This sort of reasoning is in itself a revelation of a reluctance to pay more than lip service.

b) *The Junior Red Cross*

Numerous resolutions recommend that young people be associated with the planning, application and evaluation of their own activities and even those of the National Society. In 1973, out of the 97 National Societies with a Junior Red Cross section, only 18 included their Juniors in the national committees.

c) *The principles and rules governing Red Cross relief action in the event of disaster.*

These principles are not applied in a regular and uniform manner. The most striking cases of inexecution are those concerning the drawing up and auditing of accounts. In 1974, for example, out of 24 National Societies only 6 had fulfilled their obligations. Similarly, the right of the League liaison officer to see how the donations received were used, is sometimes not appreciated; the appropriation of the remainder of the supplies or the funds is not in conformity with article 26. Finally, the transfer and channeling of relief supplies are not always in conformity with the conditions laid down in article 27. As we can see, it is above all the National Societies receiving international aid which do not respect the principles and rules.

d) *Respecting the conditions for recognition*

This point leaves much to be desired. A recent study showed that nearly one-third of the National Societies examined—7 out of 23—no longer fulfilled one or other of these conditions, for reasons closely or remotely affecting the observance of the fundamental principles of the Red Cross.

3. Observations

a) The cases of inexecution which we have mentioned, must not make us forget that from the beginning until 1928, the National Societies regularly presented complete reports on their activities and supplied useful information on the application of the resolutions. As a rule, at that time, the resolutions were applied to a great extent; the non-application of a resolution was an exception. It is true that during that period the resolutions mainly required the National Societies to submit reports on particular questions, to serve as a basis for the delegates'

discussions. Although until 1928 implementation of resolutions was voluntary the National Societies wanted to act in a uniform way and faithfully apply them.

b) After 1928, the National Societies showed their desire for independence more often and their conviction that implementation of the resolutions was voluntary. As a result there was a regression in the implementation of the resolutions as mentioned above. After 1928, the National Societies made fewer reports at the Conference on the application of the resolutions, and even on their overall activity. In 1965, 32 National Societies out of 107 presented a report; in 1969, 42 and in 1973, 48. So, the National Societies no longer inform the other members of the Red Cross of their activities and risk preventing the Conference from accomplishing its task which consists in ensuring the unity of the efforts of the National Societies, the ICRC and the League.

c) On the whole, the many activities of the National Societies are consistent with the aims assigned by the resolutions. This is inevitable, since the terms of the resolutions are often so general that analogies are bound to show up. Moreover, the resolutions contain obligations pertaining to action rather than results. When, for example, a resolution asks the National Societies to increase their efforts concerning blood transfusion, the National Societies, in their reports, will mention their work in this field, thereby giving the impression that the resolution has been carried out.

In fact, this is sometimes a "chance" application. It is carried out almost unconsciously by the National Societies which, moreover, make no further reference in their reports to a specific resolution, as they used to in the past. The resolutions contain few definite injunctions, their general and generous wording gives a great freedom of choice to those applying them. It is consequently obvious that at some point the activity of the National Societies will coincide with the behaviour proposed by the resolutions, which are often merely an illustration of the basic principles and aims of the Red Cross.

The activities of the National Societies hence coincide with the terms of the resolutions, but it would be an exaggeration to believe, owing to this coincidence, that the members have a resolution in mind when carrying out a particular activity. There is often no causal link between a resolution and a National Society activity. This, however, should not make us forget that some resolutions—fundamental principles, principles and rules governing relief actions—act as guide-lines to the members of the Red Cross and direct most of their activities.

II. CONSEQUENCES OF INEXECUTION OF RESOLUTIONS

After this rapid survey of the implementation of resolutions, it is important to examine what means the Red Cross has to ensure execution of the resolutions. For this, a distinction must be made between legal sanctions and social sanctions.

1. Legal sanctions

a) *The Red Cross Statutes*

Neither the 1928 Statutes nor those of 1952 give the Conference or any other body any sort of disciplinary power. This, however, does not mean that failure to implement resolutions, binding or even exhortative, goes unheeded.

In fact, in 1973 in Teheran, a draft resolution submitted to the Conference provided that a National Society which no longer fulfilled the conditions for recognition and admission "would risk suspension or loss of membership in the International Red Cross". Finally, the text adopted (Resolution VI) considered that such a National Society "would lay itself open to question". Furthermore, this possibility only applies to the violation of the conditions for recognition, especially the inobservance of the basic principles and the resolutions implementing these.

This resolution is important for two reasons:

The resolution has, according to its authors, statutory value; nevertheless, it did not seem opportune in 1973 to revise the statutes of the Red Cross solely for this reason.

The Conference admitted the possibility of applying legal sanctions, and not only for the inexecution of binding resolutions. In fact, the inobservance of exhortative resolutions which implement the fundamental principles can, in the long run, lead to the application of such sanctions. When a member knowingly, and over a long period of time, disregards the Red Cross resolutions it gradually oversteps the limits of legality and is guilty of disloyalty to the basic aims of the Red Cross.

It must finally be mentioned that the ICRC should be responsible for such sanctions, since its competence covers the recognition of the National Societies.

b) *The Constitution of the League*

The new Constitution of the League provides, in article 6, paragraph 6, that a National Society shall be suspended, particularly when it no

longer fulfils the conditions for admission or when it infringes a fundamental principle of the Red Cross. When a National Society infringes the fundamental principles of the Red Cross, the suspension of this Society by the League is a sanction similar to the one analyzed above. In such a case, the League and the ICRC must make a common study of the situation so that this suspension affects the participation of the National Society not only in the activities of the League, but also in those of the Red Cross as a whole.

c) *The Geneva Conventions*

Articles 44 of the First Convention and 63 of the Fourth Geneva Convention of 1949 state that the National Societies may use the name and emblem of the Red Cross for activities in keeping with the Red Cross principles and, in the event of occupation, pursue their activities in accordance with the said principles. Furthermore, article 81, paragraph 2 of Protocol I of 1977 provides that the parties to a conflict shall grant National Societies the facilities necessary for carrying out their humanitarian activities in accordance with the basic principles of the Red Cross.

The National Societies therefore have an international guarantee to assist them in carrying out their activities; but if they infringe the principles, they lose the benefit of that protection.

2. Social sanctions

The social sanctions include resolutions conveying a reminder and regret, blame, moral reproach, appeal to public opinion, publicity of the contents and the application of the resolutions, etc. They complement one another and encourage the offending party to act in a specific manner.

a) *Resolutions conveying a reminder and regret*

These resolutions are not very effective because they are forgotten as quickly as the resolutions they wish to recall; the example of ICRC financing is a significant one in this respect. Furthermore their wording is too vague and intentionally overmoderate for the National Societies to feel obliged to make lasting improvements.

b) *The pressure of public opinion*

For the moral reprobation and blame to be connected with the failure to implement a resolution, the resolution must be made public so that the latter can express its opinion and put pressure on the defaulting party, in order to make it act in accordance with the resolution.

It is worth pointing out here that the Conference resolutions are not greatly publicized, especially outside the movement. As for publicity within the Red Cross, the National Societies themselves admit that their diffusion of the resolutions is somewhat limited.

So, there is no "public opinion" of the members of the National Societies which could affect their leaders and even less a "public opinion" of the people to put pressure on the members of the Red Cross or the States. At times, pressure coming from the officers of the National Societies can be noticed on the public authorities, a sort of "public opinion" within the Red Cross. This is therefore a "particularly private public opinion", whose workings and effects only take place in the Red Cross world.

3. Final assessment

The structure of the Red Cross, the total independence of the constitutive parts and the special nature of the link uniting its members, show right away that legal sanctions, except in extreme cases, are of little use. A system of sanctions is only effective if it succeeds in obtaining the desired behaviour from the party which is either threatened by the sanctions or on which they are inflicted, owing to the strength of the relationship existing between the author and the receiver. Within the Red Cross, only the social sanctions could, as a preventive measure, encourage the National Societies to apply the resolutions. These social sanctions exist, but are rarely used; one could envisage strengthening them.

The question of sanctions has never created a stir within the Red Cross, except when dealing with fundamental problems. This attitude seems reasonable to us. National Societies which do not apply the resolutions often punish themselves. For example, if a relief action is not a success because the principles and rules were not observed, that in itself is a penalty for negligence or ill-will. The success or failure of a mission is in itself the ultimate justification of the implementation or sanction for inexecution of the resolutions. Public opinion, moral reprobation, blame, in short "pressure of shame", are often inappropriate measures. They can have the opposite effect and aggravate the feelings of the member at fault.

Within the Red Cross, the need for legal or social sanctions is further reduced because of the implications of the moral obligations to which the National Societies are subjected. Awareness of the link and of the duty of solidarity often works far better than any hypothetical

sanctions. We are absolutely convinced that if solidarity exists, sanctions are superfluous, and when it ceases to exist sanctions can in no way restore it.

Even if the National Societies are impervious to all constraint, and despite the above conclusion, sanctions must all the same exist, especially for cases violating the fundamental principles and conditions for recognition. National Societies should nevertheless realize that the voluntary application of the resolutions enables the Red Cross to progress, without being constantly impeded by deadweight which hampers not only their future activity but also that of the entire Red Cross.

Richard Perruchoud

INTERNATIONAL COMMITTEE OF THE RED CROSS

Recognition of the Tonga Red Cross Society

GENEVA, 20 October 1981

CIRCULAR NO. 519

*To the Central Committees of the National
Red Cross and Red Crescent Societies*

LADIES AND GENTLEMEN,

We have the honour to inform you that the International Committee of the Red Cross, on 15 October 1981, officially recognized the Tonga Red Cross Society.

This recognition, which constitutes a new step towards the universality of the Red Cross, brings to 127 the total number of member Societies of the International Red Cross.

This new Society officially applied for recognition by the International Committee on 2 April 1981. Its request was supported by a report on its activities, the text of its Statutes, and a copy of the 'Tonga Red Cross Society Act, 1972' recognizing it as a voluntary aid society and as an auxiliary to the public authorities, in particular of the armed forces medical services.

These documents, which were examined jointly by the International Committee and the Secretariat of the League of Red Cross Societies, showed that the qualifying conditions for recognition of a new National Society by the International Committee had been formally fulfilled.

During a recent visit to the Tonga Red Cross Society a representative of the International Committee noted that the Society, founded as a branch of the British Red Cross in 1961, was currently being consolidated and was beginning to expand geographically to cover both groups of islands of the Tonga archipelago. The Society undertakes various medical and social activities: it provides assistance to sick, disabled and needy persons, and to handicapped children; it also gives first-aid courses and co-ordinates relief to victims of disasters.

The Government of the Kingdom of Tonga confirmed, on 22 March 1978, that the State was a Party to the 1949 Geneva Conventions by a declaration of succession, with effect from 4 June 1970, when Tonga became independent.

The Society is presided over by H. M. Queen Hala'evalu Mata'aho. Its headquarters is at Nuku'alofa. ¹

The International Committee of the Red Cross has pleasure in welcoming the Tonga Red Cross Society to membership of the International Red Cross, in accrediting it and commending it, by this circular, to all other National Societies, and in expressing sincere good wishes for its future and for the success of its humanitarian work.

FOR THE INTERNATIONAL COMMITTEE
OF THE RED CROSS

Alexandre HAY

President

¹ The new Society's address is: Tonga Red Cross Society, P.O. Box 456, Nuku'alofa, Tonga.

Recognition of the Qatar Red Crescent Society

GENEVA, 30 October 1981

CIRCULAR NO. 520

*To the Central Committees of the National
Red Cross and Red Crescent Societies*

Ladies and Gentlemen,

We have the honour to inform you that the International Committee of the Red Cross has officially recognized the Qatar Red Crescent Society.

This recognition, which took effect on 26 October 1981, brings to 128 the number of member Societies of the International Red Cross.

The new Society applied for recognition by the International Committee on 4 October 1981. Its request was supported by various documents, including a report on its activities, the text of its Statutes, its constituent instrument and a copy of the ministerial decree of 27 August 1980.

The constituent instrument and Statutes of the Society were approved by the Government, as specified in the above-mentioned ministerial decree.

The constituent instrument provides that the object of the Society is to assist the public authorities in time of peace and in time of war,

according to the provisions of the Geneva Conventions of 1949. The Statutes stipulate also that in wartime the Society shall act as an auxiliary to the public authorities and in particular to the Armed Forces Medical Service, in the interest of all victims, both civilian and military. These provisions may be considered to be equivalent to government recognition of the Society as an auxiliary to the public authorities.

These various documents, which were examined jointly by the International Committee and the Secretariat of the League of Red Cross Societies, showed that the ten qualifying conditions for recognition of a new National Society had been fulfilled.

The Qatar Red Crescent Society, which was visited several times in the course of the past few years, and particularly in 1979, 1980 and 1981, by representatives of the International Committee and of the League of Red Cross Societies, was founded in 1978. Its main tasks are to improve public health, by providing health education and training first-aid workers, and to assist disabled persons and needy families among the foreign minorities living in Qatar.

The Government of Qatar acceded to the 1949 Geneva Conventions on 15 October 1975.

The Society is presided over by Sheikh Ali Bin Jabr Al-Thani. Its headquarters is at Doha ¹.

The International Committee of the Red Cross has pleasure in welcoming the Qatar Red Crescent Society to membership of the International Red Cross, in accrediting it, by this circular, and commending it to all other National Societies, and in expressing sincere good wishes for its future and for the success of its humanitarian work.

FOR THE INTERNATIONAL COMMITTEE
OF THE RED CROSS

Alexandre HAY

President

¹ The new Society's address is: Qatar Red Crescent Society, P.O. Box 5449, DOHA.

Death of Sir Geoffrey Newman-Morris

On 19 October 1981, the death occurred of Sir Geoffrey Newman-Morris, one of the best known and most popular personalities of the International Red Cross.

Sir Geoffrey was born in 1909 and, like his father before him, became a surgeon and later National Chairman of the Australian Red Cross Society. He pursued his twin careers in medicine and in the Red Cross with great distinction.

In 1939, soon after completing his medical studies, he was called up in the Australian Armed Forces, with which he served as a doctor throughout the Second World War.

On demobilization in 1946, Sir Geoffrey practised as a surgeon at Prince Henry's Hospital, Melbourne, and soon after was appointed Lecturer in Surgery at the University of Melbourne. At the same time, he devoted a good deal of his time to the Australian Medical Association, becoming first its Honorary Secretary and then Chairman of the Federal Assembly of the Association (1966-73). He also served as President of the Australian Medico-Legal Society (1967-68), as Vice-President (1975-76) and President (1976-77) of the Confederation of Medical Associations of Asia and Oceania, and he led the Australian delegation at the WHO World Medical Assemblies in 1967, 1968, 1972 and 1973.

Sir Geoffrey's affiliation with the Australian Red Cross began in 1950 as a member of the Welfare Committee of the Victorian Division. He was elected to the Victorian Division Council in 1952 and to the Executive Council of the National Society in 1953. In 1958, he became Chairman of the Australian Red Cross Society, a position which he held until 1978. In this capacity, he showed great enthusiasm, coupled with foresight and patient guidance, he knew how to stimulate and counsel. He took the time to visit the Society's all different branches, which under his leadership developed remarkably.

His activities soon spread to other parts of the world. He sat on the Board of Governors of the League of Red Cross Societies at its 25th session in 1959 and at all subsequent sessions until 1977. He was the leader of the Australian Red Cross delegation at every International Red Cross Conference from the twentieth (at Vienna, in 1965) to the twenty-third (at Bucharest, in 1977).

Sir Geoffrey Newman-Morris was one of the Vice-Chairmen of the League of Red Cross Societies from 1969 to 1973 and Chairman of

the Standing Commission of the International Red Cross from 1973 to 1977.

In addition to his involvement with the Red Cross, Sir Geoffrey belonged to the Australian Priory of the Order of St. John of Jerusalem, in which he occupied an eminent position.

Sir Geoffrey was the recipient of many medals and awards. He was honoured by the Australian Red Cross Society, as well as by a large number of National Societies in Asia, Europe and America, and was elected a life member of the Alliance of Red Cross and Red Crescent Societies of the U.S.S.R. In 1969, he was knighted by Queen Elizabeth, and in 1979 he was awarded the highest Red Cross distinction, the Henry Dunant Medal.

To all who knew him, Sir Geoffrey Newman-Morris will remain in recollection as a person of great vitality, whose actions were constantly guided by a clear intelligence and a profound sense of humanity.

Death of Charles-André Schussselé

With deep sorrow the League of Red Cross Societies announced the death on 17 February 1982, following a serious accident, of Charles André Schussselé, who had been a trusted member of its staff for thirty-seven years.

Charles-André Schussselé was born in Geneva in 1916, into a family which counted one of the first ICRC delegates among its members, for it was during the Franco-Prussian War of 1870-71 that his grandfather undertook a mission under the leadership of Dr. Louis Appia, one of the founders of the ICRC.

It was, therefore, consistent with a family tradition that Charles-André Schussselé should devote himself to humanitarian work after obtaining his law degree at Geneva University. From 1938 to 1941, he was president of the Geneva section of the *Mouvement de la Jeunesse suisse romande*. He joined the Swiss Red Cross at the beginning of the Second World War. In 1940-41, he founded its "Relief for Children" service, and remained at its head until 1943, when he became chief

of the central reception service of the Swiss Red Cross for child victims of the war. He also founded the Henry-Dunant Centre in 1943 and looked after some two hundred thousand foreign children who, because of the war, were sent to Switzerland and were given shelter there during the Second World War.

In 1944, Charles-André Schussel  joined the League of Red Cross Societies and remained a very active member of its staff until 1981. As Director of the Red Cross Youth Bureau (from 1952 to 1968), then as Director of International Relations of the League, Charles-Andr  Schussel  made innumerable mission abroad, visited, advised and encouraged National Red Cross Societies and acquired friends throughout the world. He represented the League at numerous international meetings (in particular at UNESCO) and on many occasions was a member of the delegations sent by the League to take part in various international gatherings.

Despite his many commitments throughout the world, Charles-Andr  Schussel  remained a very active member of the local Geneva section of the Swiss Red Cross. Moreover, in 1963, on the occasion of the Red Cross Centenary, he chaired the Organizing Committee of the World Conference of Educators at Lausanne, and in 1978, he was the head of the Organizing Committee for the celebration of the 150th anniversary of the birth of Henry Dunant.

Charles-Andr  Schussel  will long be remembered by his many friends.

Republic of Mauritius accedes to Protocols

On 22 March 1982, the Republic of Mauritius deposited its instruments of accession to the Protocols Additional to the Geneva Conventions of 12 August 1949, and relating to the Protection of Victims of International and Non-International Armed Conflicts (Protocols I and II), adopted in Geneva on 8 June 1977.

The instruments were registered on 22 March 1982 and the Protocols, in accordance with their provisions, will enter into force for Mauritius on 22 September 1982.

This accession brings to twenty-two the number of States parties to Protocol I, and twenty to Protocol II.

EXTERNAL ACTIVITIES

Africa

Republic of South Africa

In February, the head of the ICRC delegation in the Republic of South Africa, Mr. N. de Rougemont, had interviews with the Minister of Police, the Commissioner of Police and senior officials of the Ministry for Foreign Affairs. They discussed several points, including the possibility for ICRC delegates to visit categories of detainees not previously visited in the Republic of South Africa and to organize meetings, on the border with Angola, between delegates stationed in Windhoek and others in N'Giva (southern Angola), in order to facilitate the exchange of family messages and the dispatch of parcels to Angolan prisoners of war detained in Namibia/South-West Africa.

On 12 February, two delegates from Pretoria made a fifth ICRC visit to the Soviet prisoner held by the South African authorities.

The assistance programme for families of detainees and ex-detainees continued and 400 persons received food parcels in February. The ICRC provided financial support to six persons in need of medical treatment.

* * *

On 19 January, two ICRC delegates from Pretoria went to Bophutatswana and visited a group of 28 foreigners detained for illegal entry (19 from Zimbabwe, 9 from Malawi and 1 from Namibia).

In February, the head of the delegation was received by the President of Bophutatswana, Mr. Mangope, who agreed that delegates visit persons

detained on security grounds. The problem of the repatriation of illegal immigrants from Zimbabwe, Malawi and Angola was also discussed.

During a mission to Venda in March, ICRC delegates had access to three persons detained for security reasons.

Namibia / South-West Africa

On 26 January, the ICRC delegate in Windhoek, Mr. D. Pfaff, visited a Cuban prisoner of war captured by the South African armed forces in southern Angola and detained in Namibia.

On 12 February, he made another visit to three convicted detainees, including a woman.

In talks with the Administrator General, the Head of the Prisons Department and the Head of the Security Police, Mr. Pfaff discussed the possibility of visiting new categories of detainees.

Lesotho

The ICRC regional delegate in Mozambique, Mr. H. Berchtold, went on mission to Lesotho, where he met members of the Lesotho Red Cross and government officials. The purpose of his mission was to renew ICRC contacts with the Lesotho Red Cross and to consider the possibility for ICRC delegates to visit persons detained for security reasons. The ratification of the 1977 Protocols was also discussed.

Angola

January was a month of considerable activity and extension of ICRC assistance programmes. February, however, was marked by serious safety problems. On 20 February, the municipality of Mungo on the central Planalto (Huambo Province) was attacked. The ICRC premises were caught in the shooting and one of the ICRC's local employees was killed, despite his wearing a jacket with the Red Cross emblem. The International Committee was dismayed by the death of Mr. Gabriel Sanchez Rodrigues, who was 20 years old. Contacts have been made with the parties to the conflict to prevent the recurrence of such incidents.

Several villages having received assistance from the ICRC were also attacked.

The insecurity created by the incidents and a drop in food requirements in the Bailundo area have led to a reduction in the ICRC's work.

* * *

In January, the ICRC distributed 334 tons of relief to some 60,000 persons on the Planalto.

At the beginning of 1982, the number of people cared for in the special feeding centres set up by the ICRC was as follows: 850 persons, including 400 children, at Bailundo and 670 persons including 350 children, at Katchiungo.

Since then, the situation has changed: the Katchiungo special feeding centre has been caring for over 850 people, and the Bailundo centre less than 400. This is an indication that the nutritional situation has deteriorated at Katchiungo and improved at Bailundo.

In both municipalities, the ICRC delegates had once again used road transport to supply outlying villages such as Sfinge, Alto Chiumbo, Ushia, Ferreira and Sitio Katuta, but since the incident on 20 February the only way of conveying relief outside Katchiungo and Bailundo has been by plane.

In co-operation with "Angolan Red Cross", a camp for displaced persons has been set up at Kuito. With the help of the town social services, food is distributed there to 2,400 persons, including 400 children receiving special treatment for serious malnutrition.

Several information sessions on ICRC activities and the dissemination of Red Cross principles have been organized for the civilian and military authorities of Bié Province.

* * *

The sub-delegation recently installed at N'Giva includes two delegates, one of whom is in charge of tracing activities, one physician and one nurse. For the time being, medical assistance and tracing services are focused on N'Giva and four other towns. During the rainy season, N'Giva is accessible only by plane. According to a survey in the area south of N'Giva, the food does not seem to be in such short supply as in certain areas of the Planalto.

Mozambique

The ICRC has proposed to the Government that the Maputo orthopaedic centre for amputees be kept in operation for another year.

Ethiopia

In February, the ICRC delegation in Addis Ababa carried out two survey missions. The head of the delegation, Mr. R. Chevalley, went

to Asmara to assess humanitarian needs and another ICRC delegate went to the Ogaden, south of Harar.

In co-operation with the Ethiopian Red Cross, some 70 tons of relief, amounting to over 100,000 Swiss francs, was distributed in January and February.

In January, the ICRC sent to Ethiopia standard medical kits valued at over 30,000 Swiss francs, and equipment worth 50,000 Swiss francs for the disabled persons' rehabilitation centre at Debre Zeit.

Sudan

Since the beginning of the year, the ICRC has sent medical relief amounting to 63,000 Swiss francs and medical equipment valued at 16,000 Swiss francs, to be put at the disposal of the Eritrean relief organizations.

Somalia

The ICRC regional delegate in Kenya, Mr. A. Lennartz, was on mission in Somalia from 7 to 21 February, pursuing negotiations with the authorities with a view to resuming protection activities for Ethiopian prisoners of war.

Uganda

The Ugandan authorities requested the ICRC to put an end to its activities in the country on 31 March. The ICRC considers that the situation requires it to maintain its presence in Uganda and it will pursue its efforts to obtain permission to resume its assistance and protection programmes. The ICRC delegate general for Africa, Mr. J.-M. Bornet, discussed with the Kampala authorities the scope of ICRC tasks in Uganda and plans for the future. Meanwhile, the ICRC has contacted various humanitarian organizations in the hope that they may take over some of its assistance activities.

The Ugandan Red Cross has partly taken over from the ICRC sub-delegation at Arua the assistance programme in the West Nile area for the displaced population and for persons returning from Zaire.

In January, 28 tons of relief, amounting to approximately 110,000 Swiss francs, and medical relief to a value of about 40,000 Swiss francs, and in February, 60 tons of relief, amounting to some 200,000 Swiss francs, was distributed.

Zaire

During a mission to Kinshasa in January, the ICRC delegate general for Africa, Mr. J.-M. Bornet, discussed with President Mobutu the future of the ICRC protection and assistance programmes in Zaire.

In the course of this interview, the President confirmed his Government's intention to authorize the ICRC to continue its work in Zaire. He immediately gave permission for a round of ICRC visits to places of detention in Kinshasa and throughout the country.

In February, three ICRC delegates, accompanied by a physician and a sanitary specialist sent from Geneva, visited several places of detention in Kinshasa and its surroundings. The team then went to eastern Zaire, where it visited some 17 places of detention in Kivu Province. The team returned to Kinshasa towards the end of March.

The ICRC has allocated an initial amount of 12,000 Swiss francs for the purchase of sanitary items and has distributed blankets, soap, toiletries and cleaning utensils, and powdered milk for children.

Chad

Following a new outburst of armed clashes, the ICRC sent one of its delegates, Mrs. Dan-Renfer, to N'Djamena on 14 February to examine the possibility of resuming ICRC activities for prisoners and other victims of the fighting.

On 4 March, eight wounded prisoners of war belonging to the northern armed forces were visited in N'Djamena.

On 8 March, the delegate was joined by an ICRC physician, a delegate specialized in relief matters and a radio operator for a mission throughout the country.

An initial consignment of medicaments has already been dispatched to Chad.

ICRC appeal

In January 1982, the ICRC published a brochure entitled "Africa Report and Appeal". It is a detailed report of the ICRC's humanitarian activities in Africa in 1981, with summaries of the costs incurred and of the ICRC's financial situation at the end of the 1981 for each of the countries where it is at work. The report also describes the ICRC's projects, taking into account the foreseeable situation in Africa in 1982, and proposes a budget for them.

In short, the ICRC needs 72 million Swiss francs, that is about 6 million Swiss francs a month, to discharge its activities in Africa in 1982. Having in hand some 10 million francs brought forward from 1981 and about 13 million francs having been promised, the ICRC is appealing for approximately 48 million Swiss francs.

Latin America

El Salvador

Notwithstanding difficulties mainly, danger, ICRC relief activities in the eastern part of the country in January benefited some 30,000 persons, despite the fact that access to Morazan was closed three times by the resumption of military activities. The persons receiving ICRC assistance increased by over 12% compared to December 1981, because of the population displaced as a result of guerrilla operations. Some 255 tons of food, and mats, blankets and tents were distributed.

Distributions continued in February, despite the fact that danger restricted travel.

In the course of numerous ICRC visits to places of detention, 80 detainees, including 75 held in San Salvador, were visited for the first time in February.

In January, there was a sudden stepping up of tracing activities, coinciding with that of military operations. The number of persons coming to the tracing office for help increased from 40 visitors a day to an average of 70 at the beginning of 1982.

Appeal

In February, the ICRC launched an appeal to donors for a total of 5.8 million Swiss francs, needed for the first six months of 1982 to enable it to continue its assistance and protection activities in El Salvador (comprising tracing activities, visits to detainees, food and medical assistance and financial support to the National Red Cross Society).

Asia

Assistance to Cambodian population

The previous issue of *International Review* contained a brief account of the ICRC's plans for its activities in 1982 in aid of the Cambodian people in Kampuchea and in the refugee camps along the border between Kampuchea and Thailand. The budget drawn up for the various projects amounts to about 30 million Swiss francs. The ICRC will need nearly 20 million Swiss francs as it still had a balance of about 10.5 million left over from 1981. In February, it accordingly launched an appeal to prospective donors for the funds required to carry out those plans.

The League of Red Cross Societies, too, on resuming its traditional peace-time activities in Kampuchea, launched an appeal on 20 January to obtain for a medical aid programme contributions in the form of money, goods and various services, amounting to more than 8 million Swiss francs. With this assistance, the League hopes to have five medical teams working in Kampuchea until the end of 1982.

Thailand

After a period of relative calm at the end of 1981, the military situation along the border between Thailand and Kampuchea worsened once more between mid-January and early February 1982. With the help of medical teams working for voluntary organizations, the ICRC evacuated 66 wounded persons to the hospitals at Ta Praya and Khao-I-Dang.

The hospitals set up in the frontier area continued to be very busy. For instance, at the ICRC's surgery unit at Khao-I-Dang, 324 operations were performed in the period from 24 December 1981 to 13 January 1982, and 265 from 18 January to 21 February.

During that same period (24 December — 19 February), medical and paramedical supplies to a value of about 106,000 dollars were delivered to the Khao-I-Dang hospital and to hospitals set up in other camps.

As mentioned in an earlier issue, the ICRC has handed over the central pharmacy at Aranyaprathet and it now has only a smaller pharmacy, just large enough to supply its surgical unit at Khao-I-Dang and its mobile team.

In addition to medical assistance, the ICRC is carrying out protection activities. Its delegates have continued their weekly visits to detainees held in the Prachinburi military prison. They have also regularly visited refugees of Vietnamese origin, who are considered to be at risk in the Samet camp. Negotiations have been continued, with the purpose of seeking a satisfactory way to provide for their safety.

Furthermore, Agency activities (registration, tracing of missing persons, transmission of family messages) have continued as in the past.

Kampuchea

The League of Red Cross Societies took over, at the beginning of January 1982, part of the medical assistance programme carried out until then by the ICRC.

But the ICRC is continuing the distribution of the medicaments and medical, surgical, dental and laboratory material it still had in stock, to hospitals in the capital and to provincial and district hospitals.

The ICRC medical co-ordinator continued visits to provincial hospitals to prepare for the arrival of medical teams made available by National Societies to the League.

A blood donation campaign has been started by the local Red Cross with the object of finding blood donors among the inhabitants and so help to meet the requirements of hospitals which had been supplied until the end of 1981 with gifts of blood from abroad.

ICRC assistance to eight orphanages in different provinces will be continued. At the beginning of January, eight tons of relief (worth about 22,000 dollars) were delivered to those orphanages. Other relief supplies (such as mats) were bought locally and handed over to the Ministry for Social Activities to be given to needy persons.

At Phnom Penh, the repairs needed to recondition the building accommodating the local Red Cross office and warehouse were completed on 20 February.

No solution has yet been found to the problem of the unaccompanied children living in the frontier area camps and of their reunion with their families inside Kampuchea. Although more than a hundred children have been identified and their families' whereabouts found, the ICRC has still to obtain the authorities' agreement to the practical procedures for reuniting each of those children with his or her family, and in particular to the checks that must be previously carried out.

In January and February, the aircraft chartered by the ICRC made sixteen flights between Bangkok and Phnom Penh, carrying to Kampuchea's capital over 24 tons of relief supplies, to a value of some 200,000 dollars.

Refugees in South-East Asia and anti-piracy programme

Acts of piracy in the Gulf of Siam continued on an even greater scale all through 1981, causing fearful suffering to the refugees attempting the sea crossing. The ICRC encouraged the United Nations High Commissioner for Refugees in his efforts to draw the attention of governments to the imperative necessity of combating this international crime.

The UNHCR and ICRC exchanged their views on this matter on numerous occasions and conferred with the representatives of several governments in Geneva as well as with those of the countries on the seaboard of the Gulf of Siam.

One of the first results obtained by these talks was the Thai Government's acceptance to take up once more its anti-piracy activities and even to increase the strength of its forces sent to thwart the pirates. The sum of 3.6 million dollars needed to cover operational expenses and cost of equipment for six months will be raised by the international community.

Thailand

From 15 to 22 February, ICRC delegates carried out visits, in accordance with standard ICRC procedure, to three detention centres in Thailand, where they saw altogether 163 detainees who had received sentences of not more than three months of imprisonment.

Malaysia

From 27 January to 5 February, Mr. David Delapraz, ICRC regional delegate, and Dr. Willi, medical delegate, visited 25 security detainees in six police jails. The visits were in accordance with ICRC customary procedure and came after those carried out in October 1981 to detention centres. These detainees included persons arrested prior to the ICRC visits who were under interrogation.

Philippines

On 15 January, the ICRC regional delegate in Manila, Mr. Jean-François Olivier, visited 22 detainees held in one place of detention. In February, he visited two other places of detention containing 75 detainees.

From 9 to 15 February, the regional delegate was on the Island of Mindanao. With the local Red Cross, he made a survey of the situation

of the displaced persons in the south of Mindanao (about 2,000 families, equal to about 10,000 persons) who are the victims of the disturbances and of the armed clashes. A survey will later be made in the northern part of the island, where displaced persons are also to be found, as soon as weather conditions allow. An assistance programme will be set up for these persons, in co-operation with the Philippine Red Cross.

Indonesia

One month after the first group of Cape Verde nationals had been flown out to their country, as reported in the previous issue of *International Review*, a further group of 11 persons left Indonesia for Cape Verde on 29 January. A third group of 14 persons did likewise in mid-February. A 3-month old baby had to be put in hospital in Zurich when the aircraft arrived there. He stayed for a few days, together with his mother.

A person of Portuguese origin left East Timor on 23 February, to join his family in Portugal. He arrived in Lisbon on 24 February.

On 15 February, a mission of four ICRC delegates went to East Timor to visit places of detention and displaced persons both on Timor and Atauro Islands. On these islands about four thousand detainees were visited, in accordance with ICRC standard procedures. The Indonesian authorities gave their approval for a medical and food assistance programme to be undertaken by the ICRC for the displaced persons, in particular on Atauro.

Pakistan

No change having taken place in the situation along the border with Afghanistan, the activities of the ICRC delegation in Peshawar have been carried out as before. In January and February, the surgical units of the ICRC hospital continued to tend the wounded Afghans brought in by Pakistan Red Crescent Society teams. At the end of January, the 116-bed hospital contained 113 wounded, almost its maximum capacity. The centre for paraplegics, which is in an annex of the hospital, and the artificial limb workshop for war amputees have also been carrying on with their work. The number of amputees needing an artificial limb was estimated to be about 400.

Negotiations have continued to find some humanitarian solution to the problem of the prisoners of war (whether Afghans or Soviets) captured by the Afghan movements opposed to the Kabul Government.

At the end of February, the ICRC in Geneva sent those donors whose generosity had enabled it to perform its humanitarian tasks in Pakistan a summary of its activities during the previous year. Furthermore, a detailed estimate of the cost of the programmes planned until the end of 1982 will also be forwarded to them shortly. The sum needed is expected to amount to 6.5 million Swiss francs for the ICRC's assistance and protection activities in Pakistan alone.

Middle East

Conflict between Iraq and Iran

In Iran, visits by ICRC delegates to Iraqi prisoners of war, which had been suspended by the authorities on 24 November, were resumed only in January. The delegates were authorized to visit a camp on 10 January, then on 17 and again on 26 January. At the end of January, an agreement was reached between the ICRC delegation and the Iranian authorities and visits to prisoners of war were carried out normally from 6 February.

In Iraq, ICRC delegates visited the Iranian prisoners of war from 16 to 27 January, as they had been visiting them previously, in December 1981.

On 2 February, four delegates went to Basrah, where they visited wounded Iranian prisoners of war in two hospitals.

In January, the Iranian authorities invited families of Iraqi prisoners of war to come to Iran and see their relatives held prisoner there. Soon after, the Iraqi authorities announced they would accept this invitation and would allow Iranian families to do similar visits to Iraq.

The two governments made proposals for the practical procedures for those visits (families' mode of travel; payment of travel costs and expenses while in the other country; choice of a neutral country, such as Kuwait or Turkey, where the families would transit between Iran and Iraq; etc.).

Appeal for funds

In February, an appeal was sent by the ICRC to the donors who gave their support to its protection and assistance activities in the conflict between Iraq and Iran, asking them to continue to provide financial assistance for the extension of its activities until 30 June 1982.

In its appeal, the ICRC stated that it intended to continue its programme in aid of prisoners of war in both Iran and Iraq (visits to prisoners; transmission of family messages; possible repatriation of wounded and sick prisoners of war). It has also been visiting occupied territories, caring for displaced persons, providing them with material assistance, if required, and co-operating with the Iranian and Iraqi authorities in the organization of visits to the prisoners of war by their relatives.

At the end of December 1981, the ICRC's deficit for its Iraq-Iran activities in 1981 amounted to nearly 2 million Swiss francs. As it was estimated that the cost of its activities for the six months January-June 1982 would amount to 3.6 million Swiss francs, the ICRC, in its appeal for financial support, has requested a sum totalling 5.6 million Swiss francs.

Bahrain

After an unsuccessful coup d'état in December 1981 and the reported large number of persons under arrest, the ICRC considered it appropriate to offer its services to the Bahrain government with a view to protection activities. On 12 February, a note to that effect was delivered by an ICRC delegate who was in Bahrain on mission.

Syria

After violent disturbances had taken place in Hama on 2 and 3 February, the ICRC decided to offer its services relating to medical aid and to protection, if necessary. This offer was delivered to the Syrian Permanent Mission in Geneva on 12 February.

People's Democratic Republic of Yemen

The ICRC despatched a letter to the Vice-President of the "Red Crescent Association" of South Yemen, stating its desire to carry out a mission in that country, with the object of visiting political prisoners, inspecting the association's provincial centres and examining various problems in connection with refugees and displaced persons.

Lebanon

In January and February 1982, the country experienced a period of relative calm, giving the ICRC delegation an opportunity to visit hospitals and dispensaries, make inventories of supplies of medicaments and

medical equipment and renew their stocks, if necessary. It also continued its tracing agency activities (dealing with requests to trace missing persons, and forwarding family messages).

In February, the ICRC sent an appeal to donors for 2.7 million Swiss francs which were required to enable it to continue its programme in Lebanon until 30 June 1982.

Israel and occupied territories

A curfew imposed in the township of Rafah from 3 to 7 January led to ICRC delegates' going every day to visit the area and to negotiate with the military authorities on lifting the curfew temporarily to enable the population to obtain supplies.

As a protest against the measures taken for the annexation of the Golan Heights, the 13,000 or so persons belonging to the Druze population in that region staged a strike in February. On 25 February, the military authorities blocked all access to the four largest townships. In that same month four notables were arrested. On 21 February, ICRC delegate were allowed to visit three of them. The ICRC delegation asked for authorization to enter the villages in the area sealed off by the army, so as to make an estimate of possible humanitarian needs.

Europe

Poland

Since the end of 1981, an ICRC delegation together with personnel provided by the League of Red Cross Societies, has been working in Warsaw in close co-operation with the Polish Red Cross. Mr. Frank Schmidt, delegate general for Europe and North America, led the delegation during the early stages of its mission; he was replaced at the end of February by Mr. Peter Küng. The delegation, which numbered five persons at the end of December, was gradually strengthened until it comprised eleven members at the end of February. Its main tasks are

to carry out assistance activities in co-operation with the Polish Red Cross and to perform the protection activities customarily carried out by the ICRC.

The first thing which the Polish Red Cross and the delegation did was to set up assistance programmes for 70,000 aged, handicapped and sick people, 20,000 children belonging to families with social problems and 60,000 infants. Additional aid was required for 80,000 persons living in the region around Plock affected by floods in January. The relief to be sent will comprise mainly food, clothes, soap and disinfectants. From 1 January to 30 April, the cost of this aid will amount to about 25 million Swiss francs.

The distribution will be carried out by the Polish Red Cross Society's local branches, which will be advised and assisted by three relief delegates sent by the League.

The Polish Red Cross has provincial warehouses in nine of Poland's large cities. These will be the distributing centres for its 49 districts. Governmental authorization has been granted for a radio network to be set up connecting Warsaw and those nine warehouses, and an ICRC radio technician has been despatched to Poland to put it into service. In addition, sixty vehicles to be used by the local Red Cross committees have been purchased for the distribution of relief.

Surveys effected at the beginning of January had indicated that there was a pressing need for medical equipment in the hospitals. Various kits were sent to hospitals, depending on their requirements: 422 "general hospital" kits, 530 "pediatric hospital" kits; and 181 "surgical hospital" kits. The total value of all these kits amounted to about 11 million Swiss francs.

Medicaments came next on the priority list, except for those needed for the Polish Red Cross "SOS Pharmacy" programme. Supplies of medicaments until the end of April are expected to cost 3 million Swiss francs.

As for protection activities, the ICRC was informed on 21 January that the offer of its services for visits to the internees, put forward on 21 December, had been accepted by the Polish authorities. Accordingly, the ICRC delegates have been granted authorization to visit, in accordance with standard ICRC procedures, all persons interned after 13 December 1981.

An ICRC team, which included a doctor, began its visits to detention places on 22 January. By the end of February, the delegates had seen 1035 internees in 6 places of detention. Toilet kits were given to the internees at those visits. In response to joint requests put forward by

the Polish Red Cross and the ICRC, the authorities released 128 internees on humanitarian grounds, mainly for medical reasons.

The Central Tracing Agency, working in co-operation with the corresponding services of the Polish Red Cross, received 3500 requests to trace missing persons or forward family messages. By the end of February, more than 1600 replies had been received and transmitted.

In Geneva, the "Poland Operation Group" set up jointly by the ICRC and the League, is acting as a liaison office between the delegation in Poland and the various donor Red Cross Societies on whose generosity the entire operation depends. The office has periodically sent the Societies information on the way the activities have developed in Poland, requests for gifts, and instructions on the shipment of goods. In February, an urgent appeal was sent, mentioning that relief amounting to 42.7 million Swiss francs, in cash and in kind, was needed to carry out the International Red Cross relief programmes in Poland until 30 April. The appeal mentioned that about a third of this amount had not yet been received or pledged.

IN THE RED CROSS WORLD

SEVENTH AWARD OF THE HENRY DUNANT MEDAL

The Henry Dunant Medal, intended to constitute recognition and reward for outstanding services or acts of self-sacrifice in the cause of the Red Cross on the part of a member, was awarded this year to:

Mrs. Alexandra Issa-el-Khoury of the Lebanese Red Cross,
Mr. Ismael Reyes Icabalceta of the Nicaraguan Red Cross,
Mr. Melchior Borsinger, former ICRC delegate,
Mrs. Krista Djordjevic, of the Yugoslav Red Cross, posthumously.

The medal was presented to the first two recipients by Sir Evelyn Shuckburgh, Chairman of the Standing Commission of the International Red Cross, on 6 November 1981, at the Twenty-fourth International Red Cross Conference, at Manila. Mrs. Stefa Spiljak, member of the Presidency of the Yugoslav Red Cross, received the medal awarded posthumously to Mrs. Krista Djordjevic. In the absence of Mr. Melchior Borsinger, the medal awarded to him was handed to the President of the ICRC, Mr. A. Hay.

The following citations were made by the Standing Commission in respect of each of the recipients:

Mrs. A. Issa-el-Khoury

Mrs. Alexandra Issa-el-Khoury embodies a long tradition of heroic and devoted work in the service of the Red Cross in Lebanon. A member of the Central Committee of the Lebanese Red Cross since 1951, she succeeded her mother as President of the National Society. She was also elected Vice-Chairman of the Standing Committee of the International Red Cross.

Under her inspired leadership, the Lebanese Red Cross succeeded in regaining and maintaining a truly unique position of impartiality and humanitarian spirit, respected equally by all parties involved in the tragic conflict in Lebanon. The absolute dedication of Mrs. Issa-el-Khoury to her Red

Cross mission, her courage and endurance, in a climate of constant anguish and danger, made her a person that few Red Cross leaders could match. There were many times when she did not attend international meetings of the Red Cross, because she felt that she ought not to abandon the front line, where lay danger and suffering.

The Standing Commission wishes to pay special tribute to the remarkable qualities that she has continually shown under exceptional circumstances and at great risk to her life.

Mr. Ismael Reyes Icabalceta

Mr. Ismael Reyes Icabalceta has been a member of the Nicaraguan Red Cross for the last fifteen years, during which time he served as President and later as Treasurer. He has supported and assisted the members of his National Society in all kinds of circumstances, sometimes in danger of his life, as was the case for example during the recent civil war in Nicaragua. The heroism that he showed in time of crisis earned him the respect not only of his fellow countrymen but also of international bodies engaged in humanitarian activities.

Recognizing the exceptional service that he has rendered in recent years, the Standing Commission of the International Red Cross awards him the Henry Dunant Medal.

Mr. Melchior Borsinger

During his forty years of service with the ICRC, from 1940 to 1980, Mr. Melchior Borsinger performed to the full the role of ICRC delegate, both at headquarters and in the field, shouldering responsibilities that required not only technical knowledge but also exceptional human qualities: sense of duty, discretion, endurance and courage.

To ensure that the Geneva Conventions are properly applied in time of war, in civil war, or in situations of tension and violence, ICRC delegates must be present at flash points and on all fronts. The list of missions carried out by Mr. Melchior Borsinger could be equally that of all the dramatic and violent conflicts that have plunged mankind into grief in the course of the past forty years. He carried out his tasks with a courage and intelligence that we have come to associate with the model ICRC delegate, and that give additional distinction to the whole Red Cross movement.

In awarding the Henry Dunant Medal to Mr. Melchior Borsinger, the Standing Commission also pays tribute to all those who work for the Red Cross in hazardous conditions and at risk to their lives.

Mrs. Krista Djordjevic

Mrs. Krista Djordjevic devoted all her life to humanitarian and cultural work in her country and was made an honorary life member of the Red Cross of Yugoslavia. She thus became a living symbol of the ideals of the Red Cross. As early as the period between the two world wars, she established mobile health centres and hospitals in rural regions. During the Second World War she played a leading role in the organization and development of the Yugoslav Red Cross, a task that she pursued for many years. Her beneficial and comforting presence was a genuine source of encouragement for her fellow citizens in all the disasters, whether man-made or natural, that befell her country during her long life.

A widely known personality in international and national circles, Mrs. Krista Djordjevic showed untiring devotion, remarkable energy and perseverance in the service of the Red Cross.

The Standing Commission wishes to pay homage, posthumously, to this outstanding Red Cross personality, for the contribution that she made to the development of social welfare in her own country and for the example that she set of exceptional humanitarian devotion.

* * *

The first presentation of the Henry Dunant Medal was made in 1969, at the Twenty-first International Red Cross Conference at Istanbul.

In all, thirty-two medals have been awarded, eleven of them posthumously.

Pictures in the service of the Red Cross

For quite a long time now the Red Cross has been making use of pictures to publicize its activities and spread its principles.

In the early days, its publications were illustrated by sketches and drawings, and later, by photographs which gradually became—and still are today—an important means for disseminating and communicating the message of the Red Cross.

In addition to static pictures, the Red Cross used moving pictures also, when they came within its means. Films, in the form of reports on various Red Cross activities or as teaching material, have constituted a very significant contribution to the influence and development of the Red Cross among the general public and to the training of Red Cross personnel.

With the purpose of stimulating emulation and production among film producers, the Red Cross has organized competitions for film-makers, both professional and amateur, and festivals where prize-winners receive awards for their work. In the next few pages, International Review reports on the festivals organized by the Red Cross Societies in Hungary, Spain and Bulgaria.¹

The world stands at present on the threshold of a period in which technical progress is opening the way to considerable innovations in the production, transport, applications and use of pictures in audio-visual techniques. It is therefore appropriate that International Review should print, in the last part of this article, extracts from the address delivered by Mr. F. Stanton, Vice-President of the League of Red Cross Societies, on 30 September 1981 at the inauguration of the International Red Cross Audio-Visual Centre, in Geneva, in which he mentioned the prospects—which appear to be truly astonishing for the non-specialist—now opening

¹ We thank the Red Cross Societies of Hungary, Spain and Bulgaria for the texts which they have sent us and from which we give extracts below.

for the use of pictures thanks to modern audio-visual techniques and material.

International amateur film festival in Nagykorös

The Nagykorös Festival was created in 1970 by the Municipal Council of that Hungarian city, firstly to give a new impetus to amateur film production and secondly to arouse public interest in Red Cross activities. The themes proposed to participants were health, protection of the environment and the Red Cross.

From the outset the Hungarian Red Cross supported this festival, which was to be held every two years. From 1972, the League of Red Cross Societies was represented at the festival, which became international in 1980, in view of the number and standard of the films presented.

During the last festival, from 16 to 18 May 1980, 18 films by amateur Hungarian producers and 23 by foreign producers were shown; most of them were of a high standard and of excellent technical quality.

A jury of people from different countries awarded several prizes: the first prize of the League of Red Cross Societies went to "Flor Final" by Francisco Fabregat (Spain); the Hungarian Red Cross prize was awarded to the Plovdiv (Bulgaria) amateur film club; the prize of the International Association of Amateur Producers went to another Spaniard, Carlos Tomás Ruiz; and the jury's first prize was won by the Hungarian György Nagy.

There is no doubt that the development of this international festival will prove extremely effective in increasing public awareness of Red Cross objectives.

National amateur film festival in Spain

With the help of a large film manufacturing company, the Spanish Red Cross organized for the first time, in 1980, a national amateur film festival which met with considerable success.

Among the variety of themes proposed, the Spanish producers showed a distinct preference for the problems of solitude, drugs, elderly people, the deterioration of nature, the physically handicapped, fringe groups and freedom, all of which are profound and difficult subjects to deal with, especially in short films lasting a maximum of fifteen minutes and with the limited technical possibilities offered by Super-8, whether with or without sound. Yet participation in this first festival was high, with 34 films presented, which is extremely encouraging for the Spanish Red Cross.

A jury composed of persons from artistic circles unanimously awarded the first and second prizes to two films: "Flor Final" by the amateur producer Francisco Fabregat de Castellon de la Plana and "Naturaleza Perdida" by José Carlos Tomas Ruiz; this enabled both producers to take part in the Nagykörös International Festival, where their films also won prizes.

Considering the success of this first festival, the Spanish Red Cross intends to continue encouraging the production of amateur films on Red Cross themes.

Varna film festivals

The Tenth International Festival of Red Cross and Health Films will take place from 16 to 25 June 1983 in Varna, Bulgaria.

This event will be a milestone in the history of the Varna Festivals, and a time to look back, take stock and consider the future of this international film forum, unique in the world of cinema and television.

The first Festival was organized by the Bulgarian Red Cross in 1965, with the co-operation of the League of Red Cross Societies: 53 short films from 16 countries were submitted. During the intervening years this event has grown into a major film festival, internationally recognized, bringing together representatives of National Red Cross and Red Crescent Societies, film directors, creative artists and personalities from the medical and health fields.

At the Ninth Festival in 1981 there were 481 entries (124 for the film market) from 53 countries and six international organizations.

The Bulgarian Red Cross organizes the Festival in close co-operation with the League and ICRC. The Festival is under the patronage of the League, ICRC, World Health Organization and UNESCO. The increasing participation of countries and organizations has resulted in its official recognition by the International Federation of Film Producers' Associations, thus placing it among the world's major film festivals, the only festival of films of an entirely humanitarian character.

The film and video cassettes—a recent innovation—presented are divided into four categories: Red Cross films, short and medium length documentaries on health and the environment, full length feature films dealing with topical humanitarian and health subjects and television programmes. Recent Festivals at Varna have also laid stress on the UN theme of the year; in 1980 a special competition was organized for films dedicated to the International Year of Disabled Persons.

In brief, one can say that the films presented are related to the most important issues of Red Cross and health, covering the widest aspects of humanity, social health, ecology and peace, in accordance with the Festival motto "Through humanity to peace and friendship".

The Festival audiences can reach five thousand persons at a single screening. The films are afterwards discussed by representatives of the Red Cross, of the cinema and television and members of the medical and health professions, at "round tables" and conferences. The Festival thus stimulates the exchange of ideas between people belonging to the cinema, the Red Cross, and medical circles and serves its final aim which is the promotion of the Red Cross.

International Red Cross Audio-Visual Centre

In an earlier issue, *International Review* briefly mentioned the inauguration of the International Red Cross Audio-Visual Centre. A few more words appear to be called for in order to describe it better.

The International Red Cross Audio-Visual Centre was set up, and is run jointly by the ICRC and the League of Red Cross Societies. It is at the disposal of National Red Cross Societies, information media and the public at large. The technical means at its disposal allow the Centre to meet the needs of its various users, and to produce and distribute a wide variety of audio-visual material on the history and activities of the Red Cross.

The photographic division of the Centre includes a photo-library containing 40 000 photographs and 20 000 slides, and a laboratory capable of producing programmes of slide-shows and of multi-images.

As regards 16 and 35 mm films, the Centre will record the cinematographic production of the whole of the Red Cross movement and promote exchanges and co-production. In addition, it is responsible for running the sale and loan service for films produced by the ICRC and the League.

The Centre is also equipped to produce video programmes. These may be news reports on the Red Cross, documentaries on various aspects of its activities, or educational programmes to teach and train Red Cross personnel and to provide suitable material for schools.

It is also envisaged to use video to develop internal communication within the Red Cross movement.

Although the functions of the Centre are important for information and training within the Red Cross, they should also serve to make Red Cross activities known to the general public. To this end, the

Centre is eager to keep up regular working relations with the professionals in the audio-visual world, in particular with the televised news services, in Geneva and in other countries.

* * *

When the International Red Cross Audio-Visual Centre was inaugurated on 30 September, Mr. F. Stanton, Vice-President of the League and Emeritus Chairman of the American National Red Cross, and a former president of the Columbia Broadcasting System, spoke to those present. The International Review is pleased to reprint extracts from his address.

“... While television had its start before World War II, it was not until the period after the war that it began to fulfill the dream that some of us had for it. Nowadays there are few places in the world where antennas—transmitters as well as receivers—do not mark the horizon. It is estimated that the world population of television receivers is close to 500 million. More television sets than telephones, more than automobiles, more than bathtubs, if you will. Moreover, we are today on the threshold of television’s next quantum step. Technology has opened up new and expanded opportunities for the use of the medium in a multitude of applications.

Now we are on the edge of an enormous variety of developments. We have video cassettes, video discs, video recorders that you and I can operate. We have satellites 22,000 miles overhead that can put down audio and video signals all over the globe. We have cables that can carry over 100 television programs simultaneously into the home. We have digital recordings. We have hi-fi large screen television. We have satellites that can beam their signals direct to the home. In short, we are witness to an explosion in technical developments.

These new offerings from the laboratories and manufacturers open up remarkable challenges for Red Cross. In our National Societies, and for our global efforts. The facilities of the Centre we are opening today are all important to the generation ahead for the production, processing and distribution of audio-video materials that will inform and teach.

In these brief remarks this afternoon I want to separate information and education, although, of course, they overlap. In our use of video or audio facilities we can tell our special audiences about what is happening: this meeting here today, the International Conference in

Manila, or meetings elsewhere in the world which have significance for Red Cross.

Another application for Red Cross could involve actuality reporting by camera of a disaster or emergency. Showing the flooded areas or the aftermath of an earthquake. The pictures and sounds could be based on Red Cross camera work on location, or they could be the work of others on the scene. Or a combination.

But whether it is a Red Cross meeting in Geneva or a natural disaster in some remote area on this planet, this new Centre, its experts and its equipment could be marshalled to inform the Red Cross world about it. Moreover, parts or all of such reporting could be made available to the regular channels of mass news dissemination, thereby serving Red Cross in building its public image or enhancing it.

When it comes to education, this Centre can produce recordings on film, on tape, on discs, that will show selected audiences how to do specific things, from disaster preparedness to the collection and processing of blood. Some of these will be general presentations involving people talking to people, recorded in this studio. Others will be highly technical, involving perhaps animated scientific sequences and a variety of materials from Red Cross research in blood.

Once the product of this facility is available or completed, it can be distributed in several different ways. Here again the expanding techniques open up many avenues for putting our product into the hands of the ultimate user. It is possible today to distribute our work to National Societies by satellite, by leasing time on one or more of the existing services just as we use international telephone voice circuits. Until our needs are more demanding and until our users are equipped and the costs of satellite transmission are within our reach, we can depend on video cassettes or video discs and turn to the postal service for distribution.

From that point on, distribution within a society or a country or a village will depend solely on local facilities. In some areas today and certainly in many areas tomorrow, there are means to circulate or disseminate video material on what is known as "cable". It's an oversimplification, but cable is not unlike a telephone line that connects the television receiver to the sender. Some hotels, for example, distribute movies to their rooms by cable. In some cities cable systems do the same thing for any resident who wishes to subscribe to the service. Today over one-fourth of all homes in the United States are equipped to receive at least a dozen separate cable services simultaneously, including half a dozen conventional over-the-air programs. During

the next decade—and certainly before the year 2000—the States will become a wired nation, and we will do our banking, much of our shopping, perhaps our voting and certainly our movie-going by cable. That's another story. But it will be the pattern in many developed societies.

The disc or video cassette displayed on the television receiver can be run or played in whole or in part as many times as desired. One of the current disc systems can be indexed so the viewer can retrieve a specific item or sequence. I can see the time when Red Cross will develop a circulating library of standard reference and training materials on tape or disc.

In the future the skills and technology of the Centre—coupled with outside transmission facilities—could be put to the task of setting up conferences by television. With the ever increasing costs of travel in time, in money, in risk, in congestion, in human wear and tear, the day will come when National Societies—as well as regional groups—will confer by cable or satellite in sound and pictures.

This is happening today in industrial, commercial and professional circles. I sat in one such board of directors meeting recently in which individuals on the Pacific rim, New York and Western Europe met and conferred for two hours. Why not Red Cross?

May I observe on this very pleasant occasion that I firmly believe the Centre will come to play an enormous role in the future of the International Red Cross. Our leaders will devote more time to communicating with their colleagues by the means in this studio. And generally the video approach to informing and educating our Red Cross universe will find greater and greater application through our expanding technologies. Why? Because it is more efficient, it is more effective, and in the end, it approximates experience in the real world.

All of this will not happen overnight. But it has been my experience in working with creative electronics engineers that their time frames estimated for a development are more often than not shorter, shorter not longer, than initially anticipated. Be that as it will, Red Cross is on its way with this superb facility. I salute all who have a hand in this exciting undertaking.”

MISCELLANEOUS

SMALLPOX ERADICATION

The global eradication of smallpox is a unique achievement in the history of medicine and public health.

Since ancient times, smallpox has been one of the major scourges of mankind. At the beginning of the twentieth century, this disease was still claiming victims in virtually every country in the world. However, after 1966, when the World Health Assembly recommended an intensified campaign to eradicate smallpox, progress was rapid. In 1977, its global eradication appeared to be imminent and on 8 May 1980, the World Health Assembly unanimously accepted the conclusions of the Global Commission for the Certification of Smallpox Eradication, namely, that "smallpox eradication has been achieved throughout the world", and that "there is no evidence that smallpox will return as an endemic disease".

In the publication¹ containing the Global Commission's report, the evidence upon which these conclusions are based is carefully presented and discussed. Furthermore, the Commission has also included recommendations on policy for the post-eradication era to ensure that this achievement is permanent. Among those recommendations are the discontinuation of smallpox vaccination, the continuation of investigation of reports of suspected smallpox and of the surveillance and research of monkeypox (a disease resembling smallpox clinically) in west and central Africa, the supervision of stocks and use of variola virus in laboratories, and measures designed to ensure that laboratory and epidemiological expertise in human poxvirus infections should not be dissipated.

(From *Médecine et Hygiène*,
No 1444, Geneva, 1981, p. 3842.)

¹ *The Global Eradication of Smallpox. Final Report of the Global Commission for the Certification of Smallpox Eradication*, Geneva, World Health Organization, 1980 (History of International Public Health, No 4), 135 pages.

BOOKS AND REVIEWS

BIBLIOGRAPHY OF INTERNATIONAL HUMANITARIAN LAW ¹

The bibliography, edited by Miss Huynh Thi Huong and jointly published by the ICRC and the Henry Dunant Institute, fills a long-felt need in the field of research in international humanitarian law.

The idea was originally put forward by Mr. Jiri Toman, Assistant Director of the Henry Dunant Institute, who compiled in 1977 the *Basic Bibliography of International Humanitarian Law*, which provided in a handy typewritten booklet all the titles of basic publications in this field of law. His work proved so useful that it was immediately sold out.

Wishing to provide an efficient working instrument to circles interested in the subject, the ICRC entrusted a particularly qualified lawyer, Miss Huynh Thi Huong, with the drawing-up of a more elaborate bibliography of international humanitarian law. She worked under Mr. J. Toman's direction and with the co-operation of the Henry Dunant Institute.

In establishing this bibliography without assigned geographical or linguistic limitations, Miss Huynh has achieved almost universal coverage. The bibliography contains over 5,000 titles of monographs or articles reproduced in their original languages and selected from collections of documents, reviews and periodicals published in various parts of the world.

We are convinced that the impressive amount of material it contains and the accuracy of its references will make this bibliography invaluable for all research work in international humanitarian law.

Jean Pictet

¹ *Bibliography of International Humanitarian Law applicable in armed conflicts*, by Huynh Thi Huong. Foreword by Jean Pictet. Geneva, ICRC and Henry Dunant Institute, 1980, 390 pages, 42 Swiss francs.

ADDRESSES OF NATIONAL SOCIETIES

- AFGHANISTAN (Democratic Republic) — Afghan Red Crescent, Pul-i Artan, *Kabul*.
- PEOPLE'S SOCIALIST REPUBLIC OF ALBANIA — Albanian Red Cross, 35, Rruga e Barrikadave, *Tirana*.
- ALGERIA (Democratic and People's Republic) — Algerian Red Crescent Society, 15 bis, Boulevard Mohamed V, *Algiers*.
- ARGENTINA — Argentine Red Cross, H. Yrigoyen 2068, 1089 *Buenos Aires*.
- AUSTRALIA — Australian Red Cross, 206, Clarendon Street, *East Melbourne 3002*.
- AUSTRIA — Austrian Red Cross, 3 Gusshausstrasse, Postfach 39, *Vienna 4*.
- BAHAMAS — Bahamas Red Cross Society, P.O. Box N 91, *Nassau*.
- BAHRAIN — Bahrain Red Crescent Society, P.O. Box 882, *Manama*.
- BANGLADESH — Bangladesh Red Cross Society, 34, Bangabandhu Avenue, *Dacca 2*.
- PEOPLE'S REPUBLIC OF BENIN — Red Cross of Benin, B.P. 1, *Porto Novo*.
- BELGIUM — Belgian Red Cross, 98 Chaussée de Vleurgat, 1050 *Brussels*.
- BOLIVIA — Bolivian Red Cross, Avenida Simón Bolívar, 1515, *La Paz*.
- BOTSWANA — Botswana Red Cross Society, Independence Avenue, P.O. Box 485, *Gaborone*.
- BRAZIL — Brazilian Red Cross, Praça Cruz Vermelha 10-12, *Rio de Janeiro*.
- BULGARIA — Bulgarian Red Cross, 1, Boul. Biruzov, *Sofia 27*.
- BURMA (Socialist Republic of the Union of) — Burma Red Cross, 42 Strand Road, Red Cross Building, *Rangoon*.
- BURUNDI — Red Cross Society of Burundi, rue du Marché 3, P.O. Box 324, *Bujumbura*.
- CAMEROON — Cameroon Red Cross Society, rue Henry-Dunant, P.O.B. 631, *Yaoundé*.
- CANADA — Canadian Red Cross, 95 Wellesley Street East, *Toronto, Ontario, M4Y 1H6*.
- CENTRAL AFRICAN REPUBLIC — Central African Red Cross, B.P. 1428, *Bangui*.
- CHILE — Chilean Red Cross, Avenida Santa María 0150, Correo 21, Casilla 246V., *Santiago*.
- CHINA (People's Republic) — Red Cross Society of China, 53 Kanmien Hutung, *Peking*.
- COLOMBIA — Colombian Red Cross, Carrera 7a, 34-65, Apartado nacional 1110, *Bogotá D.E.*
- CONGO, PEOPLE'S REPUBLIC OF THE — Croix-Rouge Congolaise, place de la Paix, *Brazzaville*.
- COSTA RICA — Costa Rican Red Cross, Calle 14, Avenida 8, Apartado 1025, *San José*.
- CUBA — Cuban Red Cross, Calle 23 201 esq. N. Vedado, *Havana*.
- CZECHOSLOVAKIA — Czechoslovak Red Cross, Thunovska 18, 118 04 *Prague 1*.
- DENMARK — Danish Red Cross, Dag Hammarskjöld's Allé 28, Postboks 2600, 2100 København Ø.
- DOMINICAN REPUBLIC — Dominican Red Cross, Apartado Postal 1293, *Santo Domingo*.
- ECUADOR — Ecuadorian Red Cross, Calle de la Cruz Roja y Avenida Colombia, 118, *Quito*.
- EGYPT (Arab Republic of) — Egyptian Red Crescent Society, 29, El-Galaa Street, *Cairo*.
- EL SALVADOR — El Salvador Red Cross, 17 Av. Norte y 7a. Calle Poniente, Centro de Gobierno, *San Salvador*, Apartado Postal 2672.
- ETHIOPIA — Ethiopian Red Cross, Rass Desta Damtew Avenue, *Addis Ababa*.
- FIJI — Fiji Red Cross Society, 193 Rodwell Road, P.O. Box 569, *Suva*.
- FINLAND — Finnish Red Cross, Tehtaankatu 1 A, Box 168, 00141 *Helsinki 14/15*.
- FRANCE — French Red Cross, 17 rue Quentin Bauchart, F-75384 *Paris CEDEX 08*.
- GAMBIA — The Gambia Red Cross Society, P.O. Box 472, *Banjul*.
- GERMAN DEMOCRATIC REPUBLIC — German Red Cross in the German Democratic Republic, Kaitzerstrasse 2, DDR 801 *Dresden 1*.
- GERMANY, FEDERAL REPUBLIC OF — German Red Cross in the Federal Republic of Germany, Friedrich-Ebert-Allee 71, 5300, *Bonn 1*, Postfach (D.B.R.).
- GHANA — Ghana Red Cross, National Headquarters, Ministries Annex A3, P.O. Box 835, *Accra*.
- GREECE — Hellenic Red Cross, rue Lycavittou 1, *Athens 135*.
- GUATEMALA — Guatemalan Red Cross, 3ª Calle 8-40, Zona 1, *Ciudad de Guatemala*.
- GUYANA — Guyana Red Cross, P.O. Box 351, Eve Leary, *Georgetown*.
- HAITI — Haiti Red Cross, Place des Nations Unies, B.P. 1337, *Port-au-Prince*.
- HONDURAS — Honduran Red Cross, 7a Calle, 1a y 2a Avenidas, *Comayagüela, D.M.*
- HUNGARY — Hungarian Red Cross, V. Arany János utca 31, *Budapest V*. Mail Add.: 1367 *Budapest 5*, Pf. 249.
- ICELAND — Icelandic Red Cross, Nóatúni 21, 105 *Reykjavik*.
- INDIA — Indian Red Cross, 1 Red Cross Road, *New Delhi 110001*.
- INDONESIA — Indonesian Red Cross, Jalan Abdul Muis 66, P.O. Box 2009, *Djakarta*.
- IRAN — Iranian Red Crescent, Avenue Ostad Nejatollahi, Carrefour Ayatollah Taleghani, *Teheran*.
- IRAQ — Iraqi Red Crescent, Al-Mansour, *Baghdad*.
- IRELAND — Irish Red Cross, 16 Merrion Square, *Dublin 2*.
- ITALY — Italian Red Cross, 12 via Toscana, *Rome*.
- IVORY COAST — Ivory Coast Red Cross Society, B.P. 1244, *Abidjan*.
- JAMAICA — Jamaica Red Cross Society, 76 Arnold Road, *Kingston 5*.
- JAPAN — Japanese Red Cross, 1-3 Shiba-Daimon 1-chome, Minato-Ku, *Tokyo 105*.
- JORDAN — Jordan National Red Crescent Society, P.O. Box 10 001, *Amman*.
- KENYA — Kenya Red Cross Society, St. John's Gate, P.O. Box 40712, *Nairobi*.
- KOREA, DEMOCRATIC PEOPLE'S REPUBLIC OF — Red Cross Society of the Democratic People's Republic of Korea, *Pyongyang*.
- KOREA, REPUBLIC OF — The Republic of Korea National Red Cross, 32-3Ka Nam San-Dong, *Seoul*.
- KUWAIT — Kuwait Red Crescent Society, P.O. Box 1350, *Kuwait*.
- LAO PEOPLE'S DEMOCRATIC REPUBLIC — Lao Red Cross, P.B. 650, *Vientiane*.
- LEBANON — Lebanese Red Cross, rue Spears, *Beirut*.
- LESOTHO — Lesotho Red Cross Society, P.O. Box 366, *Maseru*.

- LIBERIA** — Liberian National Red Cross, National Headquarters, 107 Lynch Street, P.O. Box 226, *Monrovia*.
- LIBYAN ARAB JAMAHIRIYA** — Libyan Arab Red Crescent, P.O. Box 541, *Benghazi*.
- LIECHTENSTEIN** — Liechtenstein Red Cross, *Vaduz*.
- LUXEMBOURG** — Luxembourg Red Cross, Parc de la Ville, C.P. 404, *Luxembourg*.
- MALAGASY REPUBLIC** — Red Cross Society of the Malagasy Republic, rue Patrice Lumumba, *Antananarivo*.
- MALAWI** — Malawi Red Cross, Hall Road, *Blantyre* (P.O. Box 30080, Chichiri, *Blantyre* 3).
- MALAYSIA** — Malaysian Red Crescent Society, JKR 2358, Jalan Tun Ismail, *Kuala Lumpur* 11-02.
- MALI** — Mali Red Cross, B.P. 280, *Bamako*.
- MAURITANIA** — Mauritanian Red Crescent Society, B.P. 344, Avenue Gamal Abdel Nasser, *Nouakchott*.
- MAURITIUS** — Mauritius Red Cross, Ste Thérèse Street, *Curepipe*.
- MEXICO** — Mexican Red Cross, Avenida Ejército Nacional n° 1032, *México* 10 D.F.
- MONACO** — Red Cross of Monaco, 27 boul. de Suisse, *Monte Carlo*.
- MONGOLIA** — Red Cross Society of the Mongolian People's Republic, Central Post Office, Post Box 537, *Ulan Bator*.
- MOROCCO** — Moroccan Red Crescent, B.P. 189, *Rabat*.
- NEPAL** — Nepal Red Cross Society, Tahachal, P.B. 217, *Kathmandu*.
- NETHERLANDS** — Netherlands Red Cross, P.O.B. 30427, 2500 GK *The Hague*.
- NEW ZEALAND** — New Zealand Red Cross, Red Cross House, 14 Hill Street, *Wellington* 1. (P.O. Box 12-140, *Wellington North*.)
- NICARAGUA** — Nicaragua Red Cross, D.N. Apartado 3279, *Managua*.
- NIGER** — Red Cross Society of Niger, B.P. 386, *Niamey*.
- NIGERIA** — Nigerian Red Cross Society, Eko Aketa Close, off St. Gregory Rd., P.O. Box 764, *Lagos*.
- NORWAY** — Norwegian Red Cross, Drammensveien 20 A, *Oslo* 2, Mail add.: *Postboks 2338, Solli, Oslo* 2.
- PAKISTAN** — Pakistan Red Crescent Society, National Headquarters, 169, Sarwar Road, *Rawalpindi*.
- PAPUA NEW GUINEA** — Red Cross of Papua New Guinea, P.O. Box 6545, *Boroko*.
- PANAMA** — Panamanian Red Cross, Apartado Postal 668, Zona 1, *Panamá*.
- PARAGUAY** — Paraguayan Red Cross, Brasil 216, *Asunción*.
- PERU** — Peruvian Red Cross, Jirón Chancay 881, *Lima*.
- PHILIPPINES** — Philippine National Red Cross, 860 United Nations Avenue, P.O.B. 280, *Manila* D 2803.
- POLAND** — Polish Red Cross, Mokotowska 14, *Warsaw*.
- PORTUGAL** — Portuguese Red Cross, Jardim 9 Abril, 1 a 5, *Lisbon* 3.
- QATAR** — Qatar Red Crescent Society, P.O. Box 5449, *Doha*.
- ROMANIA** — Red Cross of the Socialist Republic of Romania, Strada Biserica Amzei 29, *Bucarest*.
- SAN MARINO** — San Marino Red Cross, Palais gouvernemental, *San Marino*.
- SAUDI ARABIA** — Saudi Arabian Red Crescent, *Riyadh*.
- SENEGAL** — Senegalese Red Cross Society, Bd Franklin-Roosevelt, P.O.B. 299, *Dakar*.
- SIERRA LEONE** — Sierra Leone Red Cross Society, 6A Liverpool Street, P.O.B. 427, *Freetown*.
- SINGAPORE** — Singapore Red Cross Society, 15 Penang Lane, *Singapore* 0923.
- SOMALIA (DEMOCRATIC REPUBLIC)** — Somali Red Crescent Society, P.O. Box 937, *Mogadishu*.
- SOUTH AFRICA** — South African Red Cross, 77, de Villiers Street, P.O.B. 8726, *Johannesburg* 2000.
- SPAIN** — Spanish Red Cross, Eduardo Dato 16, *Madrid* 10.
- SRI LANKA (Dem. Soc. Rep. of)** — Sri Lanka Red Cross Society, 106 Dharmapala Mawatha, *Colombo* 7.
- SUDAN** — Sudanese Red Crescent, P.O. Box 235, *Khartoum*.
- SWAZILAND** — Baphalali Swaziland Red Cross Society, P.O. Box 377, *Mbabane*.
- SWEDEN** — Swedish Red Cross, Fack, S-104 40 *Stockholm* 14.
- SWITZERLAND** — Swiss Red Cross, Rainmattstr. 10, B.P. 2699, 3001 *Berne*.
- SYRIAN ARAB REPUBLIC** — Syrian Red Crescent, Bd Mahdi Ben Barake, *Damascus*.
- TANZANIA** — Tanzania Red Cross Society, Upanga Road, P.O.B. 1133, *Dar es Salaam*.
- THAILAND** — Thai Red Cross Society, Paribatra Building, Chulalongkorn Memorial Hospital, *Bangkok*.
- TOGO** — Togolese Red Cross Society, 51 rue Boko Soga, P.O. Box 655, *Lomé*.
- TONGA** — Tonga Red Cross Society, P.O. Box 456, *Nuku'alofa*.
- TRINIDAD AND TOBAGO** — Trinidad and Tobago Red Cross Society, Wrightson Road West, P.O. Box 357, *Port of Spain*, Trinidad, West Indies.
- TUNISIA** — Tunisian Red Crescent, 19 rue d'Angleterre, *Tunis*.
- TURKEY** — Turkish Red Crescent, Yenisehir, *Ankara*.
- UGANDA** — Uganda Red Cross, Nabunya Road, P.O. Box 494, *Kampala*.
- UNITED KINGDOM** — British Red Cross, 9 Grosvenor Crescent, *London, SW1X 7EJ*.
- UPPER VOLTA** — Upper Volta Red Cross, P.O.B. 340, *Ouagadougou*.
- URUGUAY** — Uruguayan Red Cross, Avenida 8 de Octubre 2990, *Montevideo*.
- U.S.A.** — American National Red Cross, 17th and D Streets, N.W., *Washington, D.C.* 20006.
- U.S.S.R.** — Alliance of Red Cross and Red Crescent Societies, I. Tcheremushkinskii proezd 5, *Moscow* 117036.
- VENEZUELA** — Venezuelan Red Cross, Avenida Andrés Bello No. 4, Apart. 3185, *Caracas*.
- VIET NAM, SOCIALIST REPUBLIC OF** — Red Cross of Viet Nam, 68 rue Bà-Triệu, *Hanoi*.
- YUGOSLAVIA** — Red Cross of Yugoslavia, Simina ulica broj 19, *Belgrade*.
- REPUBLIC OF ZAIRE** — Red Cross of the Republic of Zaire, 41 av. de la Justice, B.P. 1712, *Kinshasa*.
- ZAMBIA** — Zambia Red Cross, P.O. Box R.W.1, 2837 Brentwood Drive, *Lusaka*.